DOCUMENT RESUME

ED 150 791 EC 103 899

TITLE Emotionally Handicapped Pupils: Developing Appropriate Educational Programs.
INSTITUTION North Carolina State Dept. of Public Instruction, Raleigh. Div. for Exceptional Children.
PUB DATE 77
NOTE 92p.
AVAILABLE FROM North Carolina Department of Public Instruction, Division for Exceptional Children, Raleigh, North Carolina 27611 ($2.00)

EDRS PRICE MF-$0.83 HC-$4.67 Plus Postage.
DESCRIPTORS Conceptual Schemes; *Contingency Management; Definitions; Elementary Secondary Education; *Emotionally Disturbed; Identification; Individualized Programs; *Models; Parent Participation; *Program Development; *Program Planning; Referral; Resource Guides; School Services; Student Evaluation; Student Placement; Teacher Qualifications
IDENTIFIERS *North Carolina

ABSTRACT

The document is designed to assist local school systems as they plan, develop, and improve programs for emotionally handicapped students. Sections cover the following areas: definition of emotionally handicapped students; pre-planning for emotionally handicapped programs; identification, referral, screening, assessment, and placement; service delivery models; program development (including the re-education model, the engineered classroom model, the development therapy model, individual educational program, and affective curriculum); behavior management techniques (with suggestions for attitudes and skills of the adult, techniques for managing surface behaviors, techniques for handling temper tantrums, life space interviewing, and time out procedures); supportive and liason services for the student and for the professional staff; parent involvement; and teacher competencies. Appendixes include an annotated bibliography of books on emotional handicaps, a list of curriculum materials, figures showing classroom arrangements, a sample individual eucation program, and a list of North Carolina residential and hospital programs. (SBH)

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EMOTIONALLY HANDICAPPED PUPILS

Developing Appropriate Educational Programs

Division for Exceptional Children
North Carolina Department of Public Instruction
Raleigh, North Carolina 27611
1977

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TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC) AND USERS OF THE ERIC SYSTEM."

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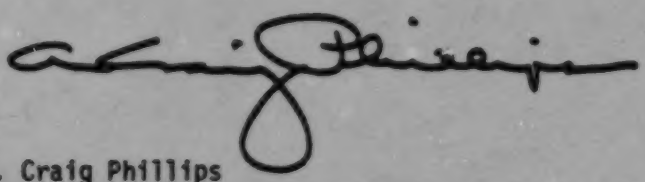
Foreword

Emotionally handicapped pupils present educators with one of their most difficult problems. Experience is proving, however, that teachers can work effectively with these children. North Carolina's public schools began programs for the emotionally handicapped as early as 1965. In 1975-76, twenty-seven school systems reported specific programs designed to provide an appropriate education for the emotionally handicapped, and in 1976-77, fifty-seven units reported special programs serving 2,430 students.

Basically, public school programs in North Carolina are utilizing models such as the Re-Education Program, the Developmental Therapy Model, the Hewett Engineered Classroom and other psychoeducational approaches. Classes provide a structured environment where rules and standards are clear and consistently enforced, a climate that is relaxed and positive, a teacher and aide who are trained in behavior management and individual instruction and who have experience working with a variety of children.

This Manual has been developed to serve as a catalyst and guide in developing new programs and improving present programs to meet the special needs of North Carolina's emotionally handicapped young people.



A. Craig Phillips
State Superintendent of Public Instruction

Introduction

Working with emotionally handicapped pupils is not a new task for public school systems, but providing an appropriate educational program for these children is new for some. All systems have tried such approaches as frequent student and parent conferences, transfers to other classrooms or schools, interventions from outside agencies, suspensions, home instruction, etc., in efforts to maintain the emotionally handicapped pupil. However, new advances in behavioral sciences and education have opened new possibilities for understanding and changing behaviors and thus providing appropriate educational programs for these pupils.

This publication is designed to assist local school systems as they plan, develop and improve programs for the emotionally handicapped. It is impossible to include all the varying philosophical approaches, behavior management strategies, materials, etc., but it is hoped that persons using this manual will go beyond the information presented here and search until they find the technique that will work with the special pupil in his unique setting.

Theodore R. Drain, Director
Division for Exceptional Children

Acknowledgements

This resource manual has been developed through the assistance of many. We would like to give special recognition to the following:

- Kathy Brock, Coordinator
  VI-B Programs
  Charlotte-Mecklenburg Schools

- Janis M. Carroll, Chief Consultant
  Programs for Emotionally Handicapped
  Division for Exceptional Children
  State Department of Public Instruction

- Judy Dudley, Assistant Director
  Curriculum and Planning
  Wright School

- Suzanne Lamm, Staff Development Specialist
  Programs for Emotionally Handicapped
  Division for Exceptional Children
  State Department of Public Instruction

- Lucy Lee, Training Specialist
  Wright School

- Ronald W. Morrisette, Director
  Training and Community Services
  Wright School

- Diane Parker, Coordinator
  Exceptional Children's Programs
  Wilson County Schools

- James L. Paul, Chairman
  Division of Special Education
  University of North Carolina at Chapel Hill

- Jane Stephens, School Psychologist
  Buncombe County Schools

Special thanks also go to Barbara Conner, Lowell Harris, and David Mills for their review and suggestions, to Pat Bowers for the art work, to Kay Bullock for assistance in production and printing, and to Edna Collar and Diana Stallings for typing the manuscript.

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Definition of Emotionally Handicapped Pupils

"Creative approaches to identifying early enough the most susceptible, the vulnerable, and the unprotected, and to strengthening them to meet the demands of working, playing, and loving can surely reduce the number that society later must care for in custodial fashion."

-- Ell Bower

1. DEFINITION OF EMOTIONALLY HANDICAPPED PUPILS

A serious emotional handicap in children is defined as behavior that is developmentally inappropriate or inadequate in educational settings as indicated by one or more of the following characteristics:

1.1 Inability to learn that cannot be explained by intellectual, sensory, neurophysical or general health factors. For example, the pupil is one or more grade levels below in specific subject areas such as reading or math, or exhibits unpatterned gaps in academic skill attainment.

1.2 Inability to build or maintain satisfactory interpersonal relationships with peers or teachers. For example, the pupil engages in excessive fighting, is unable to participate in group activities, shows unwillingness to follow directions, refuses teacher input, or prefers solitary play.

1.3 Inappropriate or immature types of behavior or feelings under normal conditions. For example, the pupil cries excessively, is confused or unable to cope with group work or sharing materials, or seeks inordinate amounts of teacher attention.

1.4 A general pervasive mood of unhappiness or depression. For example, the pupil is sad, often showing dissatisfaction with self, withdraws and needs prompting for open communication, seldom displays joy or receives compliments easily.

1.5 A tendency to develop physical symptoms, pains, or fears associated with personal or school problems. For example, the pupil complains of frequent headaches or stomachaches, is listless much of the time not engaging in activities, or displays great fear of bodily injury from normal sports.

The behavior pattern must be of sufficient duration, frequency, and intensity to call attention to the need for intervention on behalf of the child to insure his/her educational success. The term does not include children who are socially maladjusted, unless it is determined that they are seriously emotionally handicapped. For purposes of classification and educational programming, children diagnosed as autistic are considered seriously emotionally handicapped.

Pre-Planning for Emotionally Handicapped Programs

"None of us is as smart as all of us."

-- Patricia Ellen Ricci

2. PRE-PLANNING FOR EMOTIONALLY HANDICAPPED PROGRAMS: BASIC DECISIONS

The success or failure of an emotionally handicapped program very often depends on the amount and quality of pre-planning efforts. It is paramount that more than one person be involved. Ideally the committee should be composed of the local coordinator for special education, an assistant superintendent, the teacher(s) of the special classes, a regular class teacher, the principal in whose school the program will be housed, and appropriate representatives from community agencies (Department of Social Services, Mental Health, Health Department, etc.). The best programs are ones in which roles and working relationships have been defined through a series of open and cooperative meetings in which all agencies have looked at their abilities to provide services. Regular class teachers should be kept informed regarding decisions that are made in the process of pre-planning. Their support for the new program should be enlisted at the beginning.

The planning committee should address itself to the following issues and make at least tentative decisions:

2.1 Where will the program be located? The committee should choose a location where the principal's leadership is apparent, where the staff is willing to talk to students and work out conflicts whenever possible, and where student peer climate is relaxed and positive.

2.2 What geographical area will the program serve? Beware of trying to serve too large an area. It is best to begin serving one school and then to enlarge the area if feasible.

2.3 If transportation of students is an issue, what will work best? Some options might be regular bus routes, mini-buses, public transit systems, taxi cabs, or unit owned vans. It should be remembered that emotionally handicapped pupils have low tolerance thresholds; therefore, prolonged travel may "set the child up" for an emotional crisis. Transportation of emotionally handicapped pupils should be incorporated into the general transportation plan of the local board.

2.4 On what philosophical orientation will the program be based? It is advisable that the planning committee as a group visit existing programs with different core philosophies in order to determine which will work best for them. It is imperative that the program director or supervisor and teacher be committed to the philosophy which is selected. It must be understood, however, that beyond any specific approach, the most crucial factor in a successful program is related to the personal investment school personnel make in the identified pupils. Their feelings and expressions of interpersonal concern constitute a powerful impetus for growth.

2.5 What will the referral process be? (See p. 14.)

2.6 What assessment instruments will be used? (See pp. 16-18)

2.7 Who will be involved in the placement process and how will it work? (See pp.14-19 and/or Rules Governing Programs and Services for Children with Special Needs)

2.8 How will parents be involved before and after placement? Who will be primarily responsible for parent work? (See p.14-19 and/or Rules Governing Programs and Services for Children with Special Needs)

2.9 How will pupils be phased into the program? It is most advisable to begin the program with no more than two or three pupils. Then other pupils should be placed one at a time at weekly intervals.

2.10 How will group balance be maintained? Too many acting-out, aggressive children at any one time can cause disaster.

2.11 How long will a child remain in the program? It is important to let children know what length of time they will be in the program and, if at all possible, what will happen afterwards.

2.12 How will transition into the regular program take place? The key word is gradual. Initially, for example, the student might spend short periods of time in non-academic subjects. When he is able to handle academic classes gradually, he can be phased into those. He might need resource help for a time. Good communication with all concerned is very important in the transition especially with the classroom teacher. Planning for transition to the regular program should be done on an individual basis.

2.13 Who will be responsible for liaison work during placement and follow-up work after return to regular class? Follow-up support may be necessary for individual pupils for at least two years following their total reintegration into a regular classroom. This may entail only a periodic check, but could require specific interventions and resource support requiring substantial personnel, time, and effort.

2.14 Who will be primarily responsible for writing and evaluating individual education programs? It must be anticipated that, in evolving plans for and setting goals with emotionally handicapped pupils, constant re-evaluation will be necessary. Student accomplishment must be viewed in small steps, sometimes even reducing the expectations that are set for a pupil. When goals are approached or reached, new ones can be set.

2.15 What kinds of reports and records will be maintained?

Records should include all data relevant to providing an appropriate educational program. Local education agencies should follow the guidelines to assure confidentiality of information, but also maintain accessibility to those professionals involved in the education of the child. For details, see Rules Governing Programs and Services for Children with Special Needs.

2.16 How many students should be served at any one time? It is recommended that there not be more than six to eight pupils in a self-contained emotionally handicapped program with a teacher and an aide and that a resource teacher and aide not work with more than twenty students per day.

2.17 How will the staff function? Included here are such issues as (1) planning in time for communication through team meetings and child study conferences, (2) supervision (perhaps an organizational chart should be drawn), or (3) teacher schedules (planning time for teacher planning, parent conferences, case consultation with the regular class teachers, etc.). Two other very important areas are support for the teacher and ongoing training for her/him and the regular staff.

It has become clear, especially in teaching the emotionally disturbed, that a teacher cannot function adequately for long without an informed shoulder to lean on, without an on-the-spot human wailing wall at which to gripe, to rage, to express fears and confess mistakes, to ask questions and wonder aloud. Where such a service is not provided, teacher drop-outs increase; where the human wailing wall is carefully conceived and consistently offered, where the people who are provided are educationally and psychologically informed, sensitive, sympathetic, and understanding, the turnover among teachers, even under the most incredibly difficult conditions is remarkedly lowered. The teachers themselves become aware not only of their own assets and shortcomings but of the exciting possibility of enlarged horizons, personal growth, and professional maturation.[1]

Some newly-hired emotionally handicapped teachers are untrained in this area. It is crucial that these teachers get the training they need before they enter the classroom and that training be continued throughout their stay in the program. The regular staff also needs training. Time, and funds, if necessary, should be planned into the yearly schedule for training. Particularly important is training the regular and support staff in behavior management techniques and steps that will be utilized so that they can be understood and supported.

2.18 What kinds of case and program consultation will be employed? Perhaps a psychiatrist or psychologist from the local mental health center can be secured for a few hours per week for case consultation. Program consultation can be secured free of charge from the Division for Exceptional Children, State Department of Public Instruction.

2.19 What will be the procedure for requesting materials and equipment?

2.20 How will the program be evaluated? An outside team often is the most help in the evaluation process. They can be more objective and can provide insight to problems because of their objectivity.

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[1]Long, Morse, and Newman, Conflict in the Classroom, "The Teacher and His Mental Health," Wadsworth Publishing Company, Inc., Belmont, California, p. 404.

Identification, Referral, Screening, Assessment, Placement

"During the course of growing up, most children, at one time or another, exhibit such disturbing behaviors as fearfulness, destructiveness, or hyperactivity. Most of these children are never labeled as 'emotionally disturbed' because their behavior is moderate in degree, occurs only infrequently, and has no apparent pattern."

-Frank M. Hewett, 1974

3. IDENTIFICATION

Emotionally handicapped pupils identified early in life can be helped with less trouble to themselves and their communities than would be the case later in life. Below is a list of specific behaviors which may assist teachers in recognizing pupils who have emotional handicaps. If pupils are exemplifying any one of these behaviors to such an extent that they are not progressing in school, the teacher, other professional educator, or parent should be alerted to a possible problem.[2]

3.1 Short Attention Span -- Unable to Concentrate:
-not able to pay attention long enough to finish an activity.

3.2 Restless or Hyperactive:
-moves around constantly, fidgets; does not seem to move with a purpose in mind; picks on other children.

3.3 Does Not Complete Tasks -- Careless, Unorganized Approach to Activities:
-does not finish what is started; does not seem to know how to plan to get work done.

3.4 Listening Difficulties -- Does Not Seem to Understand:
-has trouble following directions; turns away while others are talking; does not seem to be interested.

3.5 Avoids Participation With Other Children or Only Knows How to Play by Hurting Others:
-stays away from other children; always plays alone; leaves a group of children when an activity is going on; bites, hits, or bullies.

3.6 Avoids Adults:
-stays away from adults; does not like to come to adults for attention.

3.7 Repetitive Behavior:
-does some unusual movement or repeats words over and over; cannot stop activity himself.

3.8 Ritualistic or Unusual Behavior:
-has a fixed way of doing certain activities in ways not usually seen in other children.

3.9 Resistant to Discipline or Direction (impertinent, defiant, resentful, destructive or negative):
-does not accept directions or training; disagreeable, hard to manage; destroys materials or toys deliberately; temper tantrums.

3.10 Unusual Language Content (bizarre, strange, fearful, jargon, fantasy):
-very odd or different talk with others or in stories.

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[2] From "Identifying Children With Special Needs," a brochure published by the Rutland Center, Athens, Georgia.

3.11 Speech Problems:
-rate: speech that is unusually fast or slow.
-articulation: difficulty making clear speech sounds.
-stuttering: difficulty with flow of speech; repeating sounds, words or phrases; blocking words or sounds.
-voice: unusually loud, soft, high or low; scratchy.
-no speech: chooses not to talk or does not know how to talk so that others can understand.

3.12 Physical Complaints:
-talks of being sick or hurt; seems tired or without energy.

3.13 Echoes Other's Speech:
-repeats another person's words without intending for the words to mean anything.

3.14 Lack of Self-Help Skills:
-unable to feed self, unable to dress self, unable to conduct toilet activities unaided, or to carry out health practices such as washing hands, brushing teeth, etc.

3.15 Self-Aggressive or Self-Derogatory:
-does things to hurt self.
-says negative things about self.

3.16 Temperamental, Overly Sensitive, Sad, Irritable:
-moody, easily depressed, unhappy, shows extreme emotions and feelings.

As indicated by the above behaviors, some emotionally handicapped pupils have problems with too much behavior, i.e., aggression, while others have problems with too little behavior, i.e., withdrawal. It is also important to note that during the course of growing up, many children, at one time or another, exhibit such disturbing behaviors as fearfulness, destructiveness, or hyperactivity. However, most of these children are never labeled as emotionally handicapped because their "behavior is moderate in degree, only occurs infrequently, and has no apparent pattern," to use Frank Hewett's phrase.

This initial identification of a need is not to be considered referral for special class placement but rather that the child is having difficulty and the parent or professional educator is concerned with meeting the special needs of the child. If a professional educator is the person identifying the child, initial contact should be made with the parents before the referral is made. It may be that some situational stress or acute trauma -- ranging from death in the family to a value or style conflict between the child (and/or his parents) and the teacher -- may be causing the behaviors. In such cases, some adaptation of the regular class program may be sufficient to meet the child's needs.

4. REFERRAL

If the pupil's needs cannot be met by adapting the regular class program, then the professional educator should provide the principal or other designated person a written assessment of the pupil's strengths and weaknesses and request that at least one of the following observe the pupil in class: principal, chairperson of programs for exceptional children, teacher of exceptional children, or appropriate support services personnel. The observation is

especially important to identifying pupils with emotional handicaps. Teachers who are responsible for some 30 pupils can hardly be expected to give their full attention to one pupil for more than a short period of time. An objective observer, who can concentrate on one pupil and his/her reaction to his/her environment, may be able to note particular aspects of the environment that set off certain behaviors. If possible, the observer should see the child in a variety of settings, i.e., classroom (with different teachers if in a secondary school), playground, etc.

If, after observation by a third party, the pupil's teacher, principal and the chairperson for programs for exceptional children do not feel that the regular class program can be adapted to meet the pupil's needs, the pupil should be referred to the school-based committee which will decide if comprehensive screening and assessment is appropriate. If it is determined that screening and/or assessment require the administration of instruments, interviews or other procedures used selectively with an individual child, (not given to everyone in the child's class, grade, or school), written parental (guardian) permission must be obtained. Within 30 days of the referral, the local education agency shall send a written notice to the parents or guardian(s) describing the evaluation procedures to be followed and requesting consent for the evaluations.

If the parent(s) or guardian(s) consent, the local education agency shall provide or cause to be provided an appropriate assessment within 30 calendar days after sending the notice. If they do not, the local education agency may obtain a due process hearing on the failure of the parent to consent.

The school based committee should be selected from the following: principal (or designee) as chairperson, teacher referring the child, chairperson for exceptional children (or designee), teacher of exceptional children, psychologist, social worker, guidance counselor, speech, language, and hearing specialist, physician or school nurse, physical therapist, occupational therapist, physical education teacher, recreation specialist, referring agency personnel, parent(s).

5. SCREENING AND EVALUATION BEFORE PLACEMENT

5.1 Required:

5.1.1 Psychological evaluation: The psychological evaluation shall include, but not be limited to, the assessment of intellectual functioning, educational progress, adaptive behavior and psycho-motor development. Such examination shall be performed by a qualified examiner who is either certified by the State Department of Public Instruction or licensed under the N. C. Psychological Licensing Act. The following are suggested instruments for intellectual assessment:

Age	Title
3-9	*Columbia Mental Maturity Scale, 3rd ed.*
2-18	*Leiter International Performance Scale*
2-adult	*Stanford-Binet (Rev. Form LM)*
4-6½	*Wechsler Preschool and Primary Scale*
5-15	*Wechsler Intelligence Scale for Children - Revised (WISC-R)*
16-adult	*Wechsler Adult Intelligence Scale (WAIS)*
Pre-School Functional Age	*Psychoeducational Profile***

*For specific information concerning instruments used for intellectual assessment (i.e., publisher, cost, standardization), see The Mental Measurements Yearbook by Oscar Buros or Index of Assessment and Evaluation Instruments published by and available from the Division for Exceptional Children, SDPI.

**Recommended as a supplementary instrument for pupils with autistic tendencies or severe language impairment. For specific information, contact TEACCH, Division of Psychiatry, School of Medicine, University of North Carolina, Chapel Hill.

The following are suggested instruments for personality assessment:

Projectives

Age or Grade	Title	Time
4-up	*Bender-Gestalt Test*	Varies
3-10	*Children's Apperception Test*	Varies
4-up	*Thematic Apperception Test*	2 hours
6-18	*Picture Word Test*	30 min.
3-15	*Goodenough-Harris Drawing Test*	10-15 min.
5-16	*Minnesota Percepto-Diagnostic Test*	Varies

Personality Development and Adjustment

5-9	*Child Behavior Rating Scale*	10 min.
12-19	*The Demos D Scale*	15-40 min.
7-15	*Junior Eysenik Personality Inventory*	Varies

Self Concept

4-18	*Self-Concept and Motivation Inventory (4 levels)*	15 min.
12-adult	*Tennessee Self-Concept Scale*	10-20 min.
8-18	*Jesness Inventory*	20-30 min.

Behavior Rating Scales

8-12	*Devereaux Child Behavior Rating Scale*
K-6	*Devereaux Elementary School Behavior Rating Scale*
13-18	*Devereaux Adolescent Behavior Rating Scale*
9-12	*Walker Problem Behavior Identification Checklist*

5.1.2 Educational Evaluation

An individually administered standardized achievement test must be given by the school psychologist or other qualified personnel (i.e., classroom teacher, special education teacher, guidance counselor) to determine academic strengths and weaknesses. Areas to be measured include: reading, writing, arithmetic and spelling. The following are examples of some suggested instruments:

Grade	Title	Time
K-12	*Wide Range Achievement Test (WRAT)*	20-30 min.
K-12	*Peabody Individual Achievement Test*	30-40 min.
1-6	*Durell Analysis of Reading Difficulty (Harcourt Brace)*	30-90 min.
K-7	*Key Math Diagnostic Arithmetic Test* *Spache's Diagnostic Reading Scales*	30 min.

5.1.3 Adaptive Behavior

Age	Title	Time
3-12 & up	*Adaptive Behavior Scale-AAMD*	20-30 min.
No age limit	*Camelot Behavioral Checklist*	Untimed
0-adult	*Vineland Social Maturity*	20-30 min.

5.1.4 Psycho-Motor Development

Age	Title	Time
6-14	*Lincoln-Oseretsky Motor Development Scale*	
4-10	*Devereaux Test of Extremity Coordination*	
6-10	*Purdue Perceptual Motor Survey*	
4 & over	*Bender-Gestalt Visual Motor*	

5.2 Recommended Screening and Evaluation Before Placement

5.2.1 A medical evaluation by a qualified physician is strongly recommended for any pupil who is exhibiting physical complaints such as headaches, upset stomach, being tired or without energy.

In the event the pupil is on medication prescribed by a physician, the professional educators should be in contact with the physician and become thoroughly familiar with the exact medication and its effect on the child. Ideally, the educator and physician should communicate on a regular basis to discuss progress or lack of progress.

Vision and hearing screening can be conducted by the school health nurses or other appropriate personnel. Speech, language and hearing specialists may conduct hearing screening. Medical evaluation of these functions should be conducted by a physician.

5.2.2 Speech and language development: The following aspects of speech and language should be evaluated: articulation, fluency, voice and language (syntax, morphology, semantics).

6. PLACEMENT

If, after reviewing all assessment data, the school based committee recommends to the administrative placement committee that the child be placed in a special program or service for the emotionally handicapped, then the committee will proceed to develop an individualized education program which will specify the following.*

(a) a statement of present levels of educational performance;

(b) a statement of annual goals, including short-term instructional objectives;

(c) a statement of specific educational services to be provided, and the extent to which the child will be able to participate in regular educational programs;

(d) a statement of the specific educational and related services needed by the child but not available;

(e) the projected date of initiation and anticipated duration of services; and

(f) appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether instructional objectives are being achieved.

The parents must have the opportunity to participate in the development of the individual education program and must give written permission for placement. (See p.62 for sample individual education program.)

7. TRANSITION BACK TO REGULAR CLASS PROGRAM

(See p. 8, 2.12.)

*For specific requirements, see Rules Governing Programs and Services for Children With Special Needs and/or Direct Services to Exceptional Children: A Process Model, published by the Division for Exceptional Children, SDPI.

Service Delivery Models

"An effective continuum of services is integrated and responsive to the needs of individual children. A system is mainstreaming if and only if there are alternative educational settings available and if the policies and practices function to maintain children in the least restrictive setting for him at the time. As the child's needs change, what is least restrictive will change and the continuum of integrative services must respond accordingly."

--James L. Paul, 1977
Presentation at Summer Institute

8. SERVICE DELIVERY MODELS

It is essential that school systems provide as many alternatives as possible to meet the needs of the emotionally handicapped pupil. Often a pupil may be placed in a particular program, i.e., residential program or resource room, because nothing else is available. The following continuum of services such as that shown in Figure 1, p.26 , is recommended. It is obvious that all local education agencies would not be able to provide all services within the local school system, i.e., residential school program. However, such programs should be available at least on a contractual basis. Smaller units, in particular, will need to design programs which are flexible enough to meet the needs of both the pupil who needs part-time placement and the pupil who needs full-time placement in a special class for a period of time, but can gradually return to the regular class.

Also, there may be extenuating circumstances in the child's total life space which would necessitate short term placement in a residential program, i.e., to give the family some relief so they can prepare to work effectively with the child.

As shown by Figure 1, p.26, educational services needed by emotionally handicapped pupils require a full continuum of services from the regular public school class to the residential hospital programs.

8.1 Regular Classroom With or Without Supportive Services:
Many emotionally handicapped pupils can be appropriately served in a regular classroom if teachers are trained in behavior management. A consulting teacher, counselor or school psychologist can provide assistance by observing the child in the classroom to help determine environmental conditions or events that precede the undesirable behavior. The teacher and support person can then work together to plan for modification of the environment and/or behavior management strategies. Supportive personnel and teachers may also work with parents and community agencies.

8.2 Regular Class Plus Supplementary Instructional Services:
Some local education agencies have gone one step further and added an aide to the regular classroom. The regular teacher, an aide, and support personnel are providing an appropriate education for some 24 regular students and six students who are identified as emotionally handicapped.

8.3 Part-time Special Class: The part-time special class is appropriate for the child who can function in a regular class for a portion of the day, but needs the support academically or socially of a more individualized class for one or two periods a day. An essential aspect of this program is that the resource teacher works closely with the parents, regular classroom teacher or teachers and other school personnel and community agencies who have contact with the child to plan and implement appropriate learning experiences for the child.

The part-time special teacher's role should include an initial responsibility for no more than twenty children whose difficulties have been shown to stem primarily from a behavioral or emotional problem. A minimum of two hours daily beyond "in class" responsibilities should be allowed for the part-time special teacher to work in the regular classroom setting, to do planning and to function in general as a behavior management specialist. This could entail preventative and crisis intervention work with students and their teachers. Counseling techniques for exploring feelings, setting limits and goals, and contingency and social contracting are methods typically employed by a behavior management specialist in addition to the provision of appropriate and individualized academic task assignments.

8.4 Full-time Special Class: Students who are not able to function in a regular classroom for even part of the day will need a full-time special class. Some units are utilizing such models as the Engineered Classroom, Developmental Therapy, or Re-Education in their full-time special classes. (See pp. 29-33.)

8.5 Special Day Programs: This level in the continuum is usually used to specify special schools in public school systems; however, most local education agencies in North Carolina are finding it more appropriate to locate programs for the emotionally handicapped in regular public school settings since the transition to the regular class can then be more gradual and can be more carefully monitored. Also, more consistent, ongoing support can be given to the regular class teachers.

Some Special Day Programs for the seriously emotionally handicapped are found in residential school programs, such as Wright School, Alexander Children's Center, Homewood School, etc. These classes are designed to meet the needs of local students who cannot be appropriately served even in a full-time special class in a regular school and/or for students who were formerly in the residential program and are now being gradually returned to the home community and school. Many of these students have moved from the 24-hour residential setting to half-way houses or group homes and report to the day program for their educational program.

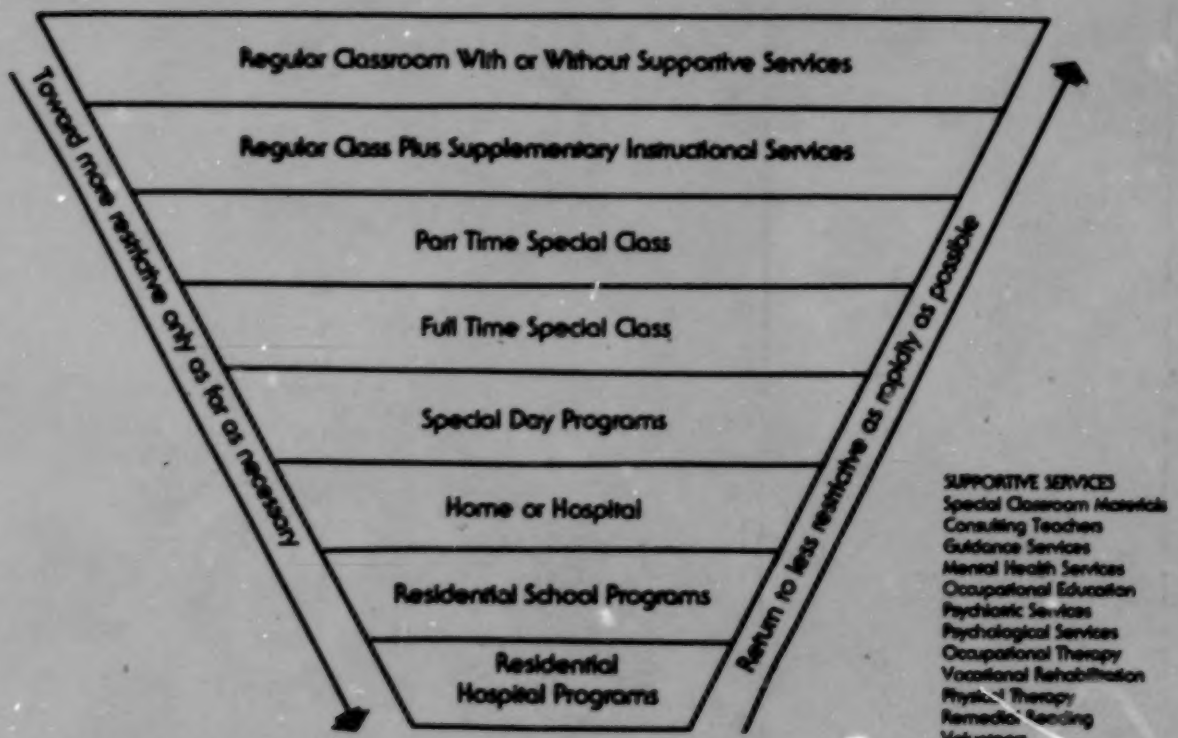
8.6 Home or Hospital Services: It is generally acknowledged that homebound services for the seriously emotionally handicapped pupil are an inappropriate educational setting. However, there may be extenuating circumstances under which, at least temporarily, such an alternative may be deemed appropriate (e.g., maintaining a pupil until other placement can be arranged). Short term placement in a hospital may be necessary in a crisis situation or for observation (for example, when a child is being placed on medication) and/or diagnosis and evaluation.

8.7 Residential School Programs: Residential school programs provide educational diagnosis and treatment to emotionally handicapped children who cannot be provided for in the home community. The length of stay in a residential program may vary from four months to eighteen months. Therapeutic camps and group homes may also be considered alternative school programs for the emotionally handicapped. (See Appendix, pp. 93 .)

8.8 Residential Hospital Programs: Residential hospital services should be reserved for pupils who are very seriously handicapped and therefore need long-term psychiatric and residential treatment. Length of stay may vary from six months to several years. (See Appendix, p.93 for listing of psychiatric hospitals in North Carolina.)

Figure 1

A CONTINUUM OF SERVICES MODEL FOR EMOTIONALLY HANDICAPPED PUPILS



Program Development

"Learning itself is one of the best therapies for children. To achieve when you have failed, to catch up when you felt hopelessly behind, to feel a part of things when you were out of it -- there is no better therapy."

--W. C. Morse

9. PROGRAM DEVELOPMENT

As indicated earlier, many of North Carolina's public school programs are utilizing the following basic models or at least some aspects of these models with specific modifications to meet the needs of the local unit:

9.1 The Re-Education Model:

The Re-Education Model is a system or ecological approach to working with the emotionally handicapped child. The focus is on the total child, including his ecological system: his home, his school, and his community. The tasks are (1) to form a goal-directed alliance among those involved in all parts of the System and (2) to pursue a united and concentrated plan of action designed to bring the ecological system into a more harmonious functional relationship.

The following underlying concepts are considered important in the Re-Education model:

- Life is to be lived now - The child learns to master each day as it comes.
- Time is an ally - Emotionally handicapped children have often been kept in traditional treatment programs for too long. Valuable time has been wasted. However, if appropriate goals are set at the beginning of a child's stay in a special program and if strategies for reaching the goals are well planned and well executed, more progress can be made in a much shorter time period.
- Trust is essential - Children learn that adults can be trustworthy, helpful people. This development of trust is the first step in re-educating the emotionally handicapped child.
- Competence makes a difference - Children learn that being able to do something well (read, play baseball or whatever) helps the child develop confidence and self-respect.
- Symptoms can and should be controlled - In Re-Education, problem behaviors are not viewed or "cast" as reflections of deep emotional problems but as behaviors that can be altered or removed and replaced, thus helping the child to adjust better to numerous situations.
- Socially acceptable values are important - Teaching of values that are accepted by most people in the community (good table manners, good language, the need to achieve, for examples) will enable a child to function in the community with fewer problems.
- Cognitive control can be taught - The child learns to shape his own behavior by learning to think through alternatives and consequences before he acts.

- Feelings should be nurtured - Children learn to accept their feelings, own them without guilt, while respecting the feelings of others at the same time.

- The group is important to children - Members of a group can offer support and help to each other and can be an important source of motivation, instruction, and control.

- Ceremony and ritual give order - Many emotionally handicapped children have led chaotic lives in which the most that could be expected was uncertainty. Providing them with a structured day and explicit, consistent expectation can greatly increase their stability and self-confidence.

- The body is a crucial part of the self - A child's self-image improves as his body image improves and as he learns mastery of physical skills.

- Communities are important - Children spend a good part of their time in their community and need to see that it has valuable resources that can be used to enhance and give support to their lives.

- Children should know joy! - A child should be able to find some joy in each day and look forward to a joy-giving event planned for tomorrow.

Re-Education concepts were first put to test in North Carolina at Wright School in Durham, a residential facility for emotionally handicapped pupils founded in 1963. The concepts, originally articulated by Dr. Nicholas Hobbs, have proven to be sound and to be replicable with modifications in alternative settings for emotionally handicapped children in the public schools.

The following is a daily schedule of a school program using the Re-Ed Model:

Sample Daily Schedule of a Re-Education Model

Morning Activities

8:00 - 8:20 Buses arrive: individual transition time for children

8:20 - 8:30 Homeroom: lunch and attendance reports

8:30 - 8:45 Read In

8:45 - 10:00 Language arts: students work on reading, spelling, language and handwriting skills. Experiences in creative writing, listening, practical applications, etc.; supplement work on basic skills.

10:00 - 10:10 Break

10:10 - 11:00 Math

11:00 - 11:30 Talk time: students share current feelings in an effort to understand themselves better and to improve relationships with others

11:30 - 12:00 Lunch

12:00 - 12:30 Affective curriculum: providing structured experiences for the exploration of feelings, relationships, sensory awareness, etc.

Afternoon Activities

Monday, Tuesday, and Thursday	12:30 - 1:30	Group Project: science, social studies, art
	1:30 - 2:20	Physical education
	2:20 - 2:30	Cleanup and dismissal
Wednesday	12:30 - 4:30	Night Out: field trip activities
Friday	12:30 - 1:30	Physical education
	1:30 - 2:20	Group project
	2:20 - 2:30	Cleanup and dismissal

9.2 The Engineered Classroom Model, developed by Dr. Frank Hewett, has as its goal to decondition the emotionally handicapped pupil to the aversive aspects of learning, teachers, and school, and to gradually phase him back into the normal environment. The effectiveness of the model can be attributed to the three elements of its foundation:

. Class assignments are made in accordance with objectives from a developmental sequence of educational goals.

. Some aspects of behavior modification principles are used.

. Sound, individualized instructional techniques are employed.

The developmental sequence is a statement of the goals or educational tasks of the developmental strategy. Hewett has attempted to translate the child development stages of social, cognitive, maturational, and personality development into operations associated with learning in the classroom. His sequence implies that before successful learning can take place, we must:

- Obtain the child's attention and make contact with him
- Get him to participate and respond to learning
- Aid him in following directions and in adopting routines
- Help him to explore his environment through multi-sensory experiences
- Teach the child to gain the approval of others and to avoid their disapproval

These general areas of behavior reflect the attention, response, order, exploratory and social levels of the sequence. These areas involve readiness skills which enable a learner to work at a mastery level where he can master the academic skills of reading and math and finally work at the achievement level where the learner achieves a knowledge in curriculum content areas. Most disturbed youngsters have significant deficiencies in their skills on the five readiness levels. The teacher's task becomes one of building these learning competencies so that the child can eventually succeed with the traditional school curriculum and the physical classroom design. The following is a sample of a daily schedule used with a Hewett Model:

8:45 - 8:55	Flag Salute Order Task	
8:55 - 9:55	Individual Reading Word Study Skill Reading	
9:55 - 10:05	Recess	
10:05 - 11:05	Individual Practice in Basic Facts Individual Arithmetic	
11:05 - 11:15	Recess and Nutrition	
11:15 - 11:35	Physical Education	
11:35 - 11:50	Listening Time	
11:50 - 12:50	Art Science Communications Order	-- Students are divided into two groups. One group accompanies the teacher to a center while the other group is with the aide. The groups rotate through two of the four centers utilizing 25 minute periods.
12:50 - 12:55	Student Checkout	-- Go to regular classes.

9.3 Developmental Therapy is a group approach designed to be used in a variety of child treatment settings with special education teachers and mental health workers. Developmental Therapy is a treatment process which (1) by keeping a child in a normal school placement during the treatment process does not isolate the disturbed child from the mainstream of normal experiences, (2) by selected, simulated experiences in the therapeutic classroom uses normal sequential changes in development both to guide and to expedite the therapeutic process, and (3) through conceptualizing both clinical inference, teacher judgment, and behavioral measurement in the same model, has an evaluation system as part of the therapeutic process.

The Developmental Therapy curriculum contains four curriculum areas as pedagogical translations designed to encompass the many possible problems of disturbed children. These curriculum areas and the messages to be conveyed to children in each of them are:

Behavior: "Appropriate behavior is important."

Communication: "It helps to talk about things."

Socialization: "The group is important."

Academics or Pre-Academics: "This is school work you can handle."

Within each curriculum area in Developmental Therapy, maturational sequences and measurable objectives are outlined. The objectives are specific to each curriculum area, while the maturational sequences cut across all four areas. These sequences are:

Stage I: Responding to the Environment with Pleasure

Stage II: Responding to the Environment with Success

Stage III: Learning Skills for Group Participation

Stage IV: Investing in Group Processes

Stage V: Applying Individual and Group Skills in New Situations

The Developmental Therapy Model was developed by Dr. Mary M. Wood of the University of Georgia. The model is a validated project with technical assistance and/or dissemination available from the University of Georgia and the Rutland Center, Athens, Georgia.

9.4 Individual Education Program

In developing an individual education program for an emotionally handicapped pupil, the following considerations need to be made:

- Cite goals which seem attainable. Do not set the staff and the child up for failure.
- Limit the number of goals realistically. Chances are great that everything which needs to be worked on cannot be worked on within a school year. In selecting goals, think in terms of which goals will help a child most in coping with the world around him.
- Goal statements should be behaviorally precise and should reflect parental concerns.
- The development of the individual educational program should be a team effort.
- As part of determining instructional objectives, consider which behavior management techniques will be employed in light of what is known about the pupil.
- If the instructional objectives are not bringing about desired effects, change them.
- Evaluating goal attainment for an emotionally handicapped pupil cannot always be as objective as for some other areas of exceptionality. Teacher observation, record keeping, feedback from parents, the pupil and others can be excellent sources of information for evaluation. Do use standardized means of evaluation when possible, however.

(See sample individual education program in Appendix p. 87.)

9.5 Affective Curriculum

9.5.1 Responsibility of the Teacher of the Emotionally Handicapped

For years, schools have been faced with the responsibility for the intellectual development of pupils. Educators have struggled with the validity and usability of all kinds of techniques and methods designed to help students perform "grade level" work. At the same time, teachers have also been held accountable for evaluating students' social skills. If they are to take responsibility for evaluating such skills, they should also take responsibility for teaching such skills.

9.5.2 Goals of Affective Curriculum

Affective curriculum is a program designed to help meet the social and emotional needs of children. It has as its basic premise the belief that "people can become aware of and control the forces affecting them, can make choices, can respond freely and intelligently, and can solve their problems."[3] "Affective curriculum represents a marriage between numerous theorists in the humanistic psychology movement and educators who have been able to translate humanistic theories into curriculum programs for children."[4] Like the humanistic theorists, proponents of affective curriculum believe that children "can grow toward becoming fully functioning (Rogers), self-actualized (Maslow), integrated (Perls) people."[5] Affective education programs attempt to help students become "clear about who they are, what they want out of life, and how they can get it without hurting others."[6] Teachers have long recognized the close relationship between a student's feeling good about himself and intellectual accomplishment. Affective curriculum attempts to structure experiences that help children "feel good about themselves, become aware of themselves and others, and develop communication and problem-solving skills to help them cope with things in general."[7]

9.5.3 Feelings Are Important

The belief that feelings are important is at the core of any good affective curriculum program. In helping children become aware of themselves, their needs, their desires, and their values, it is impossible to disregard the inseparable relationship between feelings and behaviors. All actions are based on feelings. One of the major purposes of affective education is to help children to become more aware of their feelings so that they can make responsible decisions as to how these feelings will be expressed. Affective curriculum not only encourages the expression of feelings, but also gives direction to the exploration of alternative means of expressing these feelings. This suggests that one of the most basic skills educators need to teach children is how to be in touch with or aware of feelings. Because of what seems to be a societal taboo on the direct expression of feelings, many children and adults are not only not aware of feelings that they are experiencing, but also do not have labels for these feelings. Thus, another area for educating is in the realm

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[3] Chase, Larry. The Other Side of the Report Card: A How-To-Do-It Program for Affective Education. California: Goodyear Publishing Company, Inc., 1975, p. 5.
[4] Ibid., p. 4
[5] Ibid., p. 5
[6] Ibid.
[7] Ibid.

of helping children to label feelings that they are experiencing. Of equal importance is the need to help children recognize that all feelings are acceptable but not all behaviors are acceptable. Having feelings, both good and bad, is a normal part of living. Only when children can believe that it is okay to have feelings, can they admit to the most difficult of feelings; and only when they can admit the presence of these feelings to themselves can they begin to make choices as to how these feelings will be expressed behaviorally.

9.5.4 Separate From or Integrated Into Academic Program

There are numerous theoretical approaches to affective curriculum. George Isaac Brown (Berkley) talks of confluent education in his book, Human Teachings for Human Learning. He suggests that affective education need not be separate from the material presented in the regular course programs of schools. Instead he suggests that there is a feeling level present in all material presented and this can be explored concurrently with the facts themselves. His "essential idea is that when the mind and body are both involved in learning, the learning is more effecrive."[8] Other theorists suggest that affective curriculum becomes a separate course of study. Glasser suggests class meetings as a "vehicle by which to systematically develop thinking, get involved, and make school more relevant."[9] Numerous packaged affective curriculum programs are available such as the Human Development Program (Magic Circle), Developing Understanding of Self and Others (DUSO), and Focus on Self-Development (SRA).* All of these programs view social and emotional development as an important aspect of intellectual development.

See bibliography in Appendix for affective materials.

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[8]Chase, Larry. The Other Side of the Report Card: A How-To-Do-It Program for Affective Education. California: Goodyear Publishing Company, Inc., 1975, p. 7.
[9]Ibid.

*Available from Human Development Training Institute, 1081 East Main St., El Chaon, CA 92091; American Guidance Services, Publishers Building, Circle Pines, MN; and Science Research Associates, Inc., 259 East Erie St., Chicago, IL 60611, respectively.

Behavior Management Techniques

"The criticism trap consists of thinking criticism works because the criticized behavior stops for a bit, when in fact the criticized behavior is being reinforced."

--Wesley C. Becker

10. BEHAVIOR MANAGEMENT

Most emotionally handicapped pupils have learned behaviors which are frequently troublesome and burdensome to the teacher and other staff. There is a tendency to reject the behaviors and expect immediate change. This tendency is a hurdle for all personnel to face and deal with when interacting with emotionally handicapped pupils.

The following section is not to be considered a complete behavior management "package" but only a part of a large continuum of techniques that can be used in helping pupils learn alternatives to their inappropriate behaviors.

It is important to remember that:

- The teacher should have a major part in selecting the behavior management system to be employed.
- Behavior management steps should be explained to pupils, parents, principal, regular staff, and support staff so that they can be understood and supported.
- There are no magic answers in managing behaviors. Techniques that help one pupil may not be effective with another.

10.1 Attitudes and Skills of the Adult:

Helping emotionally handicapped pupils learn to control their own behavior depends to a great extent on the adult who is with them in the classroom. The following attitudes and skills have been described as most important in helping pupils learn behavior controls.*

10.1.1 Respect for Children

The adult who will be responsible for children in any type of program must first of all be aware of his own attitudes toward children in his work with them. A positive adult views children as valuable individuals, each with his own unique qualities and skills to be optimally developed. With basic respect for children, the adult strives to understand the youngster's wants and needs. The child, in his own style, responds to the respectful tones and, when certain of the adult, joins in rapport with him toward growth-enhancing goals. Out of respect for the child, we assume he wants to handle himself in the proper manner in any given situation.

*Developed through a group effort of the Wright School Staff.

10.1.2 Knowledge of Age-Appropriate Behavior

Accompanying respect for children as individuals, basic understanding of age-appropriate behaviors is needed. Knowledge of developmental levels provides one with a guideline for establishing general expectations and a base from which to evaluate behavior within the group.

10.1.3 Clear, Reasonable Expectations: "Say what you mean and mean what you say!"

Youngsters, as do adults, want to know what is expected of them in any given situation. Some children need to have both the situation and their particular responsibility within it defined. In clearly defining situations and expectations, we provide children with the channels of praise and reinforcement for appropriate behaviors. Sometimes we assume children know exactly what they are expected to be doing when in reality they have not received a message of clear definition of task. Also, a child may behave contrary to expectations as conveyed to the group to see if this adult "really means what he says." "Does this adult care enough about me to help me do what is expected?" seems the question asked loudly by the child through his behaviors.

We have learned from experience to assess carefully our expectations for children so that we can be certain they are reasonable. The child who asks, "What are we going to do?" demands an answer. Also, we have learned that, whenever possible, activities are improved if children are included in the planning of them.

10.1.4 Reasonable, Consistent, Predictable Consequences

As vital as clear, reasonable expectations in helping children to learn appropriate behavior control are the consequences for not meeting the expectations of the situation. Children want to meet the expectations and therein receive positive gratifications. Appropriate expectations, if challenged through "misbehavior" but not supported and "backed-up" by the adult, leave the child with self-reflections echoing "I've won out again!"

10.1.5 Empathetic Understanding

With children with problems, the adult's capacity to empathize is an invaluable asset in problem solving. Our human response as adult to a child in confusion, anger, loneliness, frustration - any hurt - is to reach out with understanding of the hurt he is feeling at that moment. The child has a right to his feelings! A boy may come to you after losing out in a fist fight and say "I'm going to kill that Joe..." If the boy has a right to his feelings, we do not try to talk him out of them. At that moment, he feels like he wants to "kill that Joe." Is there a helping adult who can understand and accept his angry feelings at that moment and simultaneously protect him from hurting himself or anyone else?

Empathizing with a child means feeling with the child. In tones bespeaking caring for and knowing of his hurt in that moment, the adult lets the child in difficulty know he is not alone. The adult, in helping the child work through the problem in a supportive manner, has increased potential for the youngster to better handle a difficulty another time. To provide such help, the adult must be an excellent listener.

Accepting the feelings of children does not mean accepting all they do. The helpful adult helps children learn they have a right to their feelings - whatever they may be - but must handle their behavior in socially acceptable ways.

10.1.6 Movement from "I can't" to "I can!"

When children learn new skills - from tying shoelaces, holding a fork, writing a name, to skipping rope - they feel better about themselves. Youngsters who feel good about themselves usually reflect their affirmative self view through positive behaviors. The adult may need to do much assisting in learning a new skill (e.g., walking along in an obstacle course) but he holds before the child the expectation that "Someday you will be able to do this by yourself." An adult who sees him as "one who can" and therefore teaches him new skills is greatly needed by the youngster who sees himself and behaves as "one who cannot." The challenge is to develop a program built upon sequential steps - each with its own success experience. Each success experience increases the child's desire to try harder. Appropriate, sincere praise provides encouragement and gives reason for the child to feel important.

10.1.7 The adult must be aware that his own actions, whether he chooses so or not, set a pattern for pupils. Pupils receive their cues from the adult. Are you aware of the cues - spoken and unspoken - you give to pupils? Sometimes we give double messages to youngsters. For example, as the recreation leader begins playing catch with a pupil, he says, "O.K., Let's put away the play equipment." Or the teacher says, "Let's go to lunch" as she seats herself at the desk. There may also be non-verbal cues, e.g., the adult says one thing, but the facial expression and other body language may say another. Children look to you to learn expected ways of handling emotions. How do you behave when you are angry?

10.1.8 What About the Group?

The goal should be to help each child feel a part of the group. We control this in part in our selection of activities for children. Does the activity demand everyone's participation for fun and success? Is the activity one in which all can participate?

It is impossible and unnecessary to see or handle all behaviors within the group. Select carefully those behaviors you wish to acknowledge. For most children, adult attention and appreciation is reason enough to repeat behaviors or "misbehaviors."

10.1.9 Excerpts from Experience

Know yourself.
Be firm, kind, and consistent.
Learn from your mistakes; allow children to do the same.
Use your ability to observe and reason.
Use language children understand.
Ask questions and seek help when needed; do not give up.
Avoid introducing too many new concepts at once.
Begin at success level of the child.
Move a step at a time.
Enjoy a sense of humor; share it with children.

10.2 Techniques for Managing Surface Behavior[10]

10.2.1 Planned Ignoring

Much behavior is performed for its "goating" value and will peter out if left unchallenged. The difficult part with this technique is acquiring the ability to speculate as to which behaviors are "so surface" that they will disappear with ignoring.

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[10] Redl, Fritz and Wineman, David, Controls from Within, Techniques for the Treatment of the Aggressive Child, 1965, pp. 153-225.

10.2.2 Signal Interference

Often just a signal from an adult (e.g., catch the child's eye or wave a finger) will be sufficient to "bring back" the child's own control system at a time when he is giving in to an impulse to do something that his own judgmental system or value system would normally reject. This technique is useful when a child knows, but has not thought of the consequences of his act. It is not indicated when a child's excitement has passed the level of easy recall, or at times when, because of preceding events, a positive relationship does not exist between teacher and student or when the behavior serves pathological goals that a child's control system has yet to reach.

10.2.3 Proximity and Touch Control

Being physically close to a child, putting an arm around him or patting him on the shoulder can be effective in raising his sense of security and can provide ego support and a protection against anxiety. The proximity reminds him that the adult cares and will help. It is not to be used with a child who gets excessive sensual stimulation from physical contact or when such attention might stir up the jealousy of other children.

10.2.4 Involvement in Interest Relationships

In coping with a new experience which might be difficult to handle or manage, the interest of an enthusiastic adult may be enough to help the child get started. It is easier to venture out into new worlds with help than all alone.

10.2.5 Hypodermic Affection

Children need constant demonstrations that you care, especially when they seemingly couldn't care less, or won't admit that your caring makes any difference to them. This is not to say that love alone is enough. But sometimes, when a child is acting out because he is feeling that no one likes him, a genuine expression of affection from an adult can help him get back in control.

10.2.6 Tension Decontamination Through Humor

A well-trained attempt at "kidding" will stop the behavior. Do not confuse this technique with aggression - increasing use of ironic sarcasm, cynicism, etc.

10.2.7 Hurdle Help

Hurdle help can be used when a child with little self-control is feeling frustrated because of a difficulty encountered while trying to complete a task. Helping him over the intermediate hard spot on the way to his goal can often avoid a blowup.

10.2.8 Interpretation as Interference

An attempt at helping the child understand what he has misinterpreted can stop inappropriate behavior or produce desired surface behavior. The effectiveness of this technique requires a certain amount of ego strength in the child and of the child's acceptance of the adult.

10.2.9 Regrouping

This technique involves changing the grouping of children so that those who don't get along aren't together. It is good for avoiding or interrupting "contagion chains."

10.2.10 Restructuring

Abandon an activity program (no matter how much ego you have invested in it) when you see it is not working. Be ready to substitute an alternative, rather than "bawling them out" for not being able to stick with the program you worked so hard to plan for them. If overused, this becomes a technique for evading the responsibility of dealing with real problems.

10.2.11 Direct Appeal

Saying something like, "Gee kids, I'm tired. Lay off, will you?" can be effective. This will not work until the children have some real feelings for the adult - it may take months. You can appeal to the child's feelings toward you, his own sense of narcissistic pride, his knowledge of his peer group's behavior code, his pride in personal improvement, his knowledge of the undesirable consequences inherent in his action, etc.

10.2.12 Limiting Space and Tools

When you perceive that something has excessive seductive value for a child, it is better to limit it rather than let him walk into a situation you know he cannot handle. The child can view this, however, as evidence you don't like him, so it should be done without punitive effect on the part of the adult. When taking something away from a child

(rather than limiting access), the child should be reassured that he can get the object back again when and if the adult thinks he can handle it. Also, the adult should have some patience in tolerating minor misbehavior before taking away becomes necessary and should only take away after attempts to help the child to stop his disturbing behavior through cajoling, appealing, etc.

10.2.13 Antiseptic Bouncing

If a child has reached a state where he is inaccessible to other techniques, simply removing him from the group for a few minutes may help him get control. Use only when an adult can go with the child for talking and control. (See "Time Out", p.50.)

10.2.14 Permitting and Authoritative Verbot

When a behavior that is generally unacceptable cannot be stopped and is used to get your goat, you may openly permit it and this take the rebellious sting out of it. You may also stop it quite quickly because of the shock value. Also a separate but consistent sprinkling of "Sorry, kids, that is OUT" may be effective, but should not be used as a way of getting around talking with a child about his real problems and feelings.

10.2.15 Support from Routine

All children need structure but some need more than others. Without routine some children become extremely anxious. Guidelines can be provided even for unstructured periods.

10.3 Managing Temper Tantrums

Most children at various phases in their lives (particularly ages 2-4 and 5-12) experiment with temper tantrums as one means of problem solving. This behavior is normal. Seriously emotionally handicapped children, however, often use temper tantrums as their primary or only way of dealing with anxiety-producing situations. Adult intervention is demanded when loss of control occurs. The goals of the adult intervention are to (1) help the child regain control and (2) help him learn alternative means of dealing with problem situations. Well-meaning adults often make the following <u>mistakes</u> in attempting to meet the two goals:

- Automatically moving in to hold the child.
- Completely isolating the child.
- Reversing their limits or point of view (e.g., "Okay you can go on the field trip even though you haven't finished your work.")
- Automatically rushing in to talk to the child, reassure him, or lecture to him.

What then, constitutes appropriate intervention? Dr. Albert Trieschman, Director of the Walker Home for Boys, has described a tantrum as a "sequence of crisis in behavior control." In other words, there are six stages in a full-fledged tantrum. He delineates appropriate interventions at each of the stages:

10.3.1 "Rumbling and Grumbling": There is anxiety within the child which may manifest itself in a variety of behaviors, e.g., slamming a book down, rubbing knees, sulking, or pulling hair. The child may not really know what he is anxious about.

What to do: Observe the patterns of the child over a period of time. Try to see what his "rumbling" and "grumbling" cues are. Once you are aware of the pattern, you can help the child over the hurdle through talking with him (life space interview) or later cueing him to isolate himself until he regains control.

10.3.2 "Help! Help!": At this stage, the child will usually verbalize a string of "you" messages! "You do this" or "you don't do that." According to Trieschman, "Once he settles on an issue, he usually signals his need for help with some deliberately outrageous act(s)."

What to do: It may become necessary to hold the child at this point for safety's sake. Beware of holding a child more firmly than is necessary. He needs to feel that you are in control and are supportive.

10.3.3 "Either/Or": When the child feels that the adult is in control of him, he usually will verbalize threats, insults, or impossible alternatives, e.g., "You let me go or I'll leave here forever." The child is trying to show that he has some control by manipulating the adult.

What to do: Stick to your guns. Do not let the child manipulate you by his threats, etc. Indicate to the child that this tantrum will not last forever, e.g., "We'll stay here until you are back in shape. It'll be over before recess."

10.3.4 "No! No!": Though the child realizes he cannot manipulate you, he still lets you know he is not going to do as you ask.

What to do: Maintain the position that the child wants to regain control, e.g., "I want you to be in charge of yourself again." Do not tell him how much you care about him or want to help.

10.3.5 "Leave Me Alone": The child feels defeated now, so he withdraws.

What to do: Do very little talking. Allow the child to withdraw. You might inform him that the tantrum is over.

10.3.6 "Hangover": Some children look and act as if nothing had happened. Others look "hungover" and, according to Trieschman, act guilty, are annoyed with themselves and some even reproach themselves out loud.

What to do: Here is where some constructive talking can take place. How can we recognize the "rumbling and grumbling" stage? What can we agree on as a contract after we recognize it? How can I as the adult help?

Managing a temper tantrum is difficult even with these suggestions. Hopefully, however, these suggestions will at least keep lines of communication open and may accomplish much more toward helping the child learn better alternatives for problem solving.

10.4 Life Space Interviewing

Life Space Interviewing is a method of talking effectively with children about a conflict situation. The purpose of the Life Space Interview is either to provide the child with ego-support (to help him feel better) or to explore the child's behavior for some educational or therapeutic insight.[11]

Life Space Interviewing is but one behavior management technique which supplements the total continuum of behavior management techniques. Whether it is used for control and disciplinary purposes or for understanding how the child is feeling and how he perceives the world around him, the Life Space Interview depends on the adult's defensiveness of the child.

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[11] Long, Nicholas J., Direct Help to the Classroom Teacher, School Research Program, The Washington School of Psychiatry, Washington, DC, p. 58.

Every Life Space Interview develops out of a problem incident. An adult might choose to Life Space Interview a child for various reasons:

- The behavior exhibited is directly related to the child's individual behavioral goals as specified on his Individual Education Program.
- The behavior exhibited is quite unusual for that particular child and the child appears to be in a great deal of emotional pain.
- The behavior exhibited is recognized as ongoing, deviant behavior which the child cannot manage on his own.

One other important consideration in determining whether or not to Life Space Interview a child is time. It takes time to hear a child sufficiently so that he feels better, has the problem clarified, and has some plan of action. Experience has shown that taking the time to Life Space Interview saves time in the long run. The Life Space Interview can help to strengthen the relationship between an adult and a child and with this additional rapport, future problem behavior can be dealt with more rapidly.

It has been found helpful to divide the Life Space Interview into five operational steps: hear the feelings, define the problem, brainstorm alternatives, contract for change, and follow-through on the contract.

10.4.1 Feelings: The main focus of adult concern at this stage should be in helping the child to identify and label his feelings. The adult must keep in mind that the child has a right to his feelings. The purpose of the Life Space Interview is to determine a more appropriate way to express these feelings, not to deny the importance of these feelings. Thus, unconditional acceptance of feelings is important. Carl Roger's "Reflective Listening" or Thomas Gordon's "Active Listening" are useful techniques to keep in mind during this step.

10.4.2 Problem: At this stage in the Life Space Interview, the adult encourages the child, in a nonthreatening and nonjudgmental way, to describe the incident as he remembers it. The adult must guard against assuming that the problem the child is experiencing is the same as the problem the adult might have experienced. In being as descriptive of the problem as possible, the child often experiences renewed feelings. Thus, the adult must allow the feelings and problem steps to flow back and forth.

The interview is ready to progress to the next step when a clear statement of the problem (as experienced by the child) can be agreed upon by both the child and the adult.

10.4.3 Alternatives: After the problem has been clearly defined, the next step is to brainstorm alternatives. The adult must be willing to accept all alternatives. At this stage there should be no attempt to test the reality of any alternative presented by the child. The alternatives should fit the problem statement and the purpose of the Life Space Interview (either to help the child handle the present situation, or to learn something for the future).

10.4.4 Contract: This is the point in the Life Space Interview where the adult can help the child look at the reality and consequences of the alternatives. The goal of this step is for the adult and child to agree upon one of the alternatives and build a clear, realistic, and honest contract. The contract must require reasonable effort on the part of the child, remembering that a definite change in behavior is being called for and change is difficult. As the contract develops, the adult might wish to offer assistance. This assistance can take many forms. Two types of assistance which have been found useful are helping the child to "practice" what he is proposing by simulating the situation and offering to give the child a "cue" should the adult see the problem behavior starting.

10.4.5 Follow-through: The final step of the Life Space Interview is carry-through on the contract. Again, it is important to remember that change is difficult and the child deserves recognition for his efforts. Praise is crucial. Should the contract fail, the adult should think through the following possible reasons with the child and decide upon a course of action.

- The child might simply have forgotten and a reminder might be enough.
- The child and adult might have chosen the wrong alternative and a reworking of the contract might be called for.
- The real problem might not have been uncovered and a reworking of the total Life Space Interview might be needed.
- The child might have been "conning" the adult.

The Life Space Interview is a learning process. In working through the steps, the child is learning to identify feelings, clarify concerns, and look toward making changes. The child is learning to take responsibility for his own behavior by making choices and accepting responsibility for those choices. Throughout the interview, it is important to let the child have the responsibility, even if this means settling for an imperfect statement of the problem or accepting an imperfect contract.

10.5 Time Out Procedures

There are various time out or separation procedures that can be effective behavior management techniques, e.g., a designated "quiet" area in the classroom or seclusion in a separate room. They should be used as only one set of a continuum of techniques, rather than the teacher's only method for managing inappropriate behavior.

In choosing to use time out procedures, educators should keep in mind the following overall guidelines:

- Strategies should be systematically planned, carefully supervised, and continuously evaluated.

- Educators should explain the steps in the continuum (strategies) to pupils and parents before they are implemented. If there is a time out room, let them see it. Parental permission should be secured for use of seclusion time out in a special room.

- Strategies should be used in as positive a manner as possible and should not come across to pupils as punishment, e.g., "As soon as you are settled, I'll be happy for you to rejoin the group."

- Seclusion time out in a special isolation room should be used only for controlled acting out behavior, not out of control behavior, i.e., temper tantrums, and should be considered as a last resort.

The following are more specific guidelines taken from the April, 1977, issue of Exceptional Children, "Time Out in the Classroom - Implications for Special Education," by David L. Gast and C. Michael Nelson:

- *Staff should be able to identify the reinforcing situations that are maintaining the child's inappropriate behavior.*

- *Those behaviors that will result in time out should be explicitly stated before the time out contingency is implemented.*

. The teacher should attempt to control the inappropriate behavior first by employing milder forms of time out (separation within the classroom) prior to resorting to seclusion time out (in a special room).

. Documentation that milder forms of time out have proved ineffective in suppressing the inappropriate behavior should be provided before resorting to seclusion time out.

. The teacher should formulate a concise, written statement of procedures to be followed whenever placing a student in time out. The authors suggest these specific practices:

.. Avoid lengthy verbal explanations as to why the student is being placed in time out. Behaviors resulting in time out should be clearly explained prior to implementing the time out program. If an explanation is provided, it should be brief but should adequately inform the student of the misbehavior involved. A standard explanation format such as, "Because_____ you go to time out for ____ minutes," is recommended. All other interaction should be avoided.

.. Identify those behaviors, if any, that will result in a warning before time out is implemented. These generally are behaviors of low frequency and magnitude that have not been defined explicitly previously. (Other behavior normally will require no warning.)

.. To maximize opportunities to exercise self control, students should be given the opportunity to take their own time out after receiving the instruction from the teacher. However, if students refuse to take their own time out or if they fail to respond to the teacher's instruction within a reasonable time interval (5 to 10 seconds), the teacher should physically remove them to the time out area. For high intensity behavior (e.g., kicking, screaming), the student should be immediately escorted to time out. It is important that teachers realistically evaluate their ability to physically remove a child to the time out area. If a pupil is able to "break away," requiring a teacher to physically remove the student would be inappropriate. Presumably, classrooms with such students would either have a teacher or teacher aide who could control such resistance. If such is not the case, an alternative strategy will be required. This may entail a reevaluation of the reinforcers in the classroom and possible use of a response cost contingency in conjunction with a token economy. Other alternatives may include reinforcing other children for ignoring disruptive behaviors or the reassignment of the uncontrollable student to a teacher who is capable of managing highly aggressive and resistant behavior.

- .. The duration of each time out period should be brief. One to five minutes generally is sufficient. It is doubtful that time out periods exceeding fifteen minutes serve the purpose for which they are intended (i.e., temporary withholding of positive reinforcement).

- .. Release from time out should be made contingent upon the student's behavior while in time out. A changeover delay procedure of one minute (i.e., a contingency for release from time out of one minute in which no inappropriate responses are emitted) will avoid reinforcing a child's inappropriate behavior while in time out.

. If a seclusion time out is to be employed, the time out room should:

- .. Be at least six by six feet in size.

- .. Be properly lighted (preferably recessed, with the switch outside the room).

- .. Be properly ventilated.

- .. Be free of objects and fixtures with which children could harm themselves.

- .. Provide the means by which an adult could continuously monitor, visually and auditorily, the student's behavior.

- .. Not be locked. A latch on the door should be used only as needed, and only with careful monitoring.

. Records should be kept of each occasion when time out is implemented and should include the following information:

- .. The student's name.

- .. The episode resulting in student's placement in time out (i.e., behavior, activity, other students involved, staff person).

- .. The time of day student was placed in time out.

- .. The time of the day the student was released from time out.

- .. The total time in time out.

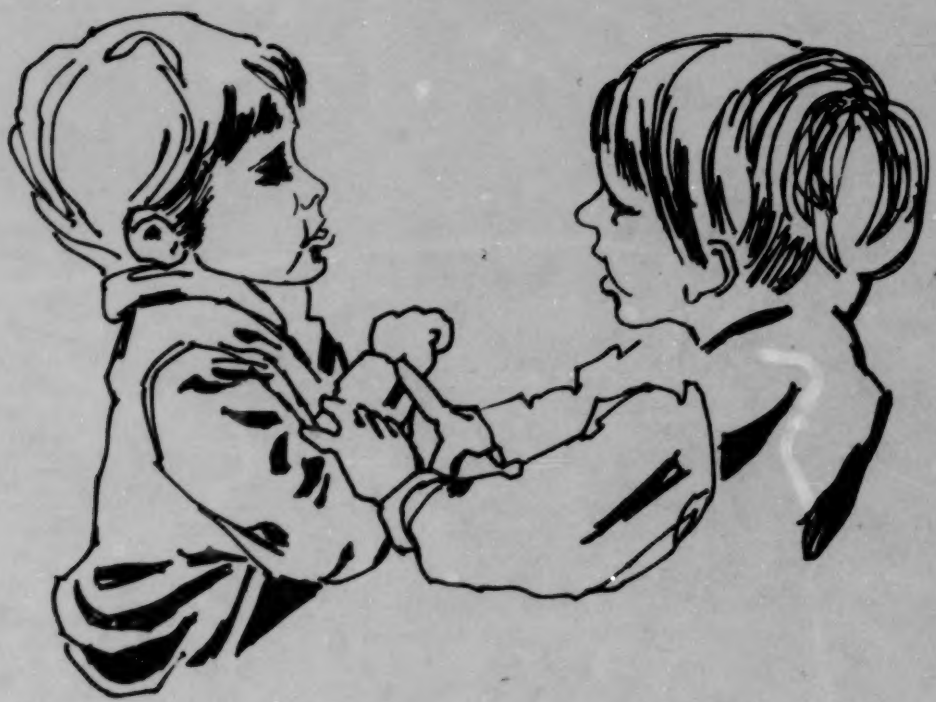
- .. The type of time out (contingent observation, exclusion, or seclusion).

- .. The student's behavior in time out.

- Differential reinforcement of more appropriate social behavior should always accompany a time out contingency.

- For time out out durations in excess of thirty minutes, a supervisory staff person should be consulted to evaluate the appropriateness of continuing the time out procedure.

- An advisory committee, consisting of the teacher, principal, behavioral specialist, and parent should be called to evaluate the appropriateness of using time out as a consequence for misbehavior if its effect in suppressing the behavior is questionable.



Supportive and Liaison Services for the Pupil and Professional Staff

"I have come to a frightening conclusion: I am the decisive element in the classroom. It is my daily mood that makes the weather. As a teacher, I possess tremendous power to make a child's life miserable or joyous. I can be a tool of torture or an instrument of inspiration. I can humiliate or humor, hurt, or heal. In all situations, it is my response that decides whether a crisis will be escalated or de-escalated and a child humanized or dehumanized."

Haim Ginnot, TEACHER & CHILD

11. SUPPORTIVE AND LIAISON SERVICES FOR THE PUPIL

11.1 Defining Roles

The availability of support services varies widely from local education agency to local education agency and school to school. Some systems have an abundance; others are not so fortunate. It is crucial that those involved in implementing programs for the emotionally handicapped gather all their support staff (within the school and outside the school) to make a plan for who can do what and who will be responsible for what. All areas must be covered including assessment, counseling, parent education, liaison with community agencies and the home, medical services, and development of the individual education program. The roles must be clear and well defined.

11.2 The Team Approach

The team approach must be emphasized. Everyone on the team needs to know what everyone else is doing. The child must be informed as to what everyone's goals are. He will gain a real sense of security in knowing that everyone is working together and that he cannot play one against the other. When there is no real team approach, the result may be an increase rather than decrease in the child's disturbance. Again, the roles must be clear and well defined.

11.3 Policies and Procedures

The team must also work out policies and procedures together. For examples, how will a child be terminated from the program, what procedures will be followed when a pupil runs away from school, what the policy is regarding isolation or quiet rooms, who will be available for support during crisis situations.

11.4 Regular Staff and Others

The entire staff of the school can be and should be supportive of the program for the emotionally handicapped including the secretary, the janitorial staff, and the cafeteria staff. They should be thoroughly oriented (especially regular staff) to the philosophy of the program and behavior management techniques that will be employed. They should be asked how they can help. The orientation and training should be ongoing.

11.5 Suggested roles: If these staff are available, responsibilities might be defined as follows:

Principal

- Is responsible for overall leadership of the program
- Positively reinforces what is happening in the classroom by using the same behavior management techniques
- Sees that teaching staff has proper materials, etc.
- Provides back-up support for the special staff
- Intervenes when there are problems involving policies and procedures
- Deals tactfully with parents to make clear the school's strategies in working with their child and communicates the limitations of reality
- Insures that the service for the emotionally handicapped is an integral part of the overall school program

School Psychologist

- Is responsible for observation and assessment
- Translates test information into educationally relevant suggestions
- Consults directly with teachers and other school personnel
- Works as part of the program team. Is available to attend local placement committee meetings
- Trains teachers in informal assessment

Guidance Counselor

- Is a member of the local placement committee
- Observes and participates in deciding behavior management strategies
- Does individual counseling when needed
- Consults with teachers
- Helps with affective curriculum in the special program
- May be responsible for parent education program

School Social Worker/Liaison Teacher

- Is a member of the local school placement committee
- Is responsible for compiling case histories before placement
- Serves as liaison among pupil, family, community agencies, and the school. Helps secure counseling for parents
- Contacts social and medical agencies regarding referrals from the school
- Assists the return of the student to the regular classroom
- Is responsible for follow-up work

School Nurse

- Is available to attend local placement committee meetings
- Serves as consultant on matters related to child development, especially in physical areas. May lead groups concerning health problems
- Is responsible for vision and hearing screening

Vocational Rehabilitation Counselor

- Determines specific strengths, weaknesses, needs and interests of the individual as related to job placement
- Provides for appropriate placement according to the individual's profile
- Provides for vocational training (on or off the job)
- Is responsible for job and follow-up counseling
- Is available for attending local school placement meetings when appropriate

Other Agency Staff (Mental Health, Developmental Evaluation Clinics, Social Services, etc.)

- Attend local school placement committee meetings when needed
- Carry out their responsibility for the individual education program
- Have access to the classroom when necessary to observe, lead group, etc.
- Work as team members with the school staff
- Act as consultants to the special program when needed
- May be responsible for parent work

12. SUPPORTIVE SERVICES FOR THE PROFESSIONAL STAFF

As indicated in the preceding, the most consistent and ongoing support can often be provided by a co-worker in one's local education agency or community, for example, the Coordinator for Exceptional Children's Programs, a fellow teacher, the counselor, principal, school psychologist, mental health person, etc. Assistance from persons outside the LEA is available as follows:

12.1 Regional Resources - The Division for Exceptional Children has a staff of five persons based in each of the eight centers for Regional Technical Assistance Services to provide technical assistance to local education agencies upon request.

- A Regional Coordinator who is responsible for overall coordinating, identifying and developing services for exceptional children within the region

- A Planning Specialist who can assist in conducting needs assessments, child find activities, etc.

- An Instructional Resource Specialist to assist in instructional strategies, materials appropriate for special needs, etc.

- A noncategorical Staff Development Specialist to provide inservice training to teachers, administrators, parents

- A Direction Specialist to provide direct services to persons with handicaps by matching local services to the person's need

12.2 Section for Emotionally Handicapped - The Division for Exceptional Children designates the following personnel who have special training and experience in working with the emotionally handicapped to provide assistance, upon request, to local education agencies statewide.

- Chief Consultant, Programs for Emotionally Handicapped

- Consultant, Programs for Emotionally Handicapped

- Two Staff Development Specialists for Emotionally Handicapped (One based in Durham County with offices at Wright School and one based in Union County)

12.3 Treatment and Education of Autistic and Other Communications Handicapped Children (TEACCH) Staff - Support and assistance for programs for autistic and other communications handicapped children may be secured from one of the following TEACCH Centers: Asheville, Charlotte, Chapel Hill, Greenville, Wilmington. (The specifics of long-term assistance should be decided upon by individual contracts between local education agencies and the Centers.)

12.4 College and University Personnel - At present, the following colleges and universities provide certification in emotionally handicapped: Appalachian, Duke University, Greensboro College, North Carolina Central, and the University of North Carolina at Chapel Hill.

Parent Involvement

"The center of learning for a child is in his home, and his parents are the first and most natural teachers."

"Guidelines: Hearing Handicapped,"
December, 1977
Department of Public Instruction

13. PARENT INVOLVEMENT

Beyond the legal requirements of involving parents, other parent work is crucial in the success of a program for the emotionally handicapped. In order to gain help and support of parents and, thus, enhance the emotionally handicapped pupil's growth, the following points are important:

13.1 Parents who have an emotionally handicapped son or daughter are under stress themselves. Often parents are blamed directly or indirectly for their child's problems. This method of dealing with parents promotes only bad feelings (guilt) and lowered self-esteem. Instead of looking for why's of a pupil's problems, it is much more effective to explore together "what can we do about it?" This proactive stance enables parents to admit mistakes and problems openly and to seek help in the resolution without any lowering of self-esteem or fear of reprisal. It also reinforces positive feelings about collaborative problem solving and enables the parents to meet future stress with renewed strength.

13.2 Parents need regular reports about their child's progress. Even the slightest gains should be highlighted. Regular conferences are ideal, but phone calls and notes can often be just as effective. The communication needs to be two-way. Parents should be encouraged to keep the school informed as to what is happening at home. Their sending a weekend report each Monday can be very helpful.

13.3 When involving parents, be considerate of work schedules. Many parents have great difficulty getting away and really cannot afford to lose pay. Night conferences for some may be necessary.

13.4 When counseling is recommended, it should be on a level that parents can accept. For instance, some might be very reluctant to see a psychiatrist but would feel very comfortable meeting with their minister or some other professional in the community.

13.5 Consider having regular parent group meetings. The leader might be a school counselor, someone from the local mental health clinic or social services, or other agency staff. A group meeting can be a real support for the parents and can help them see that they are not alone with their frustrations, problems, and griefs. The leader must be facilitative and supportive rather than demanding and confrontive. He must be able to give practical suggestions. There are various commercial kits, books, etc., which can be helpful, e.g., Parent Effectiveness Training by Dr. Thomas Gordon and "Systematic Training for Effective Parenting" by American Guidance Associates.

13.6 Many parents are caught in the "agency shuffle"; that is, they go from agency to agency seeking help. Many times there is duplication of services or there are inappropriate services. The best course to take is to sit down with the parents and all the agency people involved and decide on a plan of action.

13.7 Inform parents of all the behavior management techniques you plan to use in the classroom. Explain to them how they can be used at home. Invite them to observe in your classroom.

13.8 Siblings often have a large part in an emotionally handicapped pupil's problem. Consider having them in on conferences from time to time.

13.9 The emotionally handicapped pupil needs to know what his own goals are as well as his parents and others who are involved.

Teacher Competencies

"There is no magic, no one cure, no short-cut in teaching emotionally disturbed children. The task demands the appreciation and diagnosis of the different styles of learning and teaching that are compatible with the pupil's strengths and weaknesses."

--Long, Morse, Newman.
Conflict in the Classroom
"How Do You Teach These Children," p. 394.

14. TEACHER COMPETENCIES

The education of emotionally handicapped children and youth is a very complex professional area. Teachers of these children must be sensitive, mature and skilled professionals, able to relate to parents, professionals outside the educational system, and professional educators inside the educational system as well as to children.

Professionals now recognize several viable perspectives for understanding and working with emotionally handicapped children. The North Carolina State Department of Public Instruction recognizes the value of different perspectives and encourages the development and valuing of different perspectives in understanding and educating these children. The inter-agency work required to serve these children educationally makes it necessary to harmonize the alternative points of view to the extent necessary for cooperative efforts between the systems (mental health, social services, health, youth services, etc.). No professionally acceptable point of view should be excluded. What is necessary, however, for a competent teacher is a thorough understanding of at least one model of emotional handicap and the full methodological implications of that model for teaching these children.

There are different competencies required for different professional educators working directly or indirectly with these children. Competencies vary, for example, with the age group involved. Teachers of pre-school emotionally handicapped children need a different set of skills from those working with adolescents in a secondary educational setting.

Competencies also vary depending on the severity of the handicap. Children who have no communication skills, for example, have very different needs from children who are having difficulty with behavior control in stimulating group activities.

However, minimum competencies suggested for all teachers of emotionally handicapped are as follows:

14.1 Knowledge of the child

- An understanding of normal and abnormal growth and development
- A working knowledge of how to deal with aberrant behavior such as temper tantrums, stealing, and hyperactivity
- An understanding of the significance and causes of failure to learn and the meaning of learning disability to the child
- An ability to read and understand case histories and educational records
- An ability to develop individual educational programs based on information from objective assessment and case histories

14.2 Knowledge of curriculum and teaching

- A thorough knowledge of the regular educational curriculum of the age group involved
- An ability to develop a pupil centered rather than subject centered curriculum based on individual interest, abilities, and needs
- An ability to utilize individual methods, materials, time schedules, space arrangements, teacher aide and grouping in accordance with the special needs of the individual child
- An ability to adapt techniques to classroom situations for relieving tension and promoting good mental health
- An ability to use equipment and materials found in most educational settings

14.3 Knowledge of assessment and evaluation

- Ability to make practical use of psychiatric and psychological consultation
- Ability to understand and apply psychological reports in the individual education program
- Ability to administer and interpret individual diagnostic tests of reading and mathematics
- Ability to apply informal methods of academic evaluation
- An understanding of and ability to use the results of adaptive behavior scales such as the Walker Problem Behavior Identification Checklist and the AAMD Adaptive Behavior Scale
- An ability to understand and interpret individual tests of mental maturity

14.4 Knowledge of community organizations

- A knowledge of and ability to utilize services of private and public agencies and organizations such as child guidance clinics, domestic relations courts, vocational rehabilitation, Department of Human Resources, parent organizations, etc.

14.5 Knowledge of guidance

- Skills in techniques of individual counseling
- Skills in techniques of group counseling
- Skills in the use of a variety of behavior management techniques ranging from behavior modification to reality therapy
- An understanding of residential treatment and such concepts as milieu therapy, group therapy, etc.

14.6 Ability to work as a professional team member

- An ability to establish and maintain good working relationships with other professional workers such as teachers, social workers and psychological personnel
- An ability to interpret special programs and the problems of emotionally handicapped pupils to regular school personnel and parents
- An ability to understand one's own needs, motives, difficulties, values, and emotional problems
- An understanding of one's own limitations and the ability to work within these limits without personal guilt
- An ability to demonstrate vitality, enthusiasm, emotional energy and resiliency, high frustration threshold and endurance
- An ability to demonstrate good judgment, or sense of humor, adaptability and flexibility

Appendix

15.1 ANNOTATED BIBLIOGRAPHY

There are many excellent resources which provide basic information about emotional handicaps. The books here represent only a sampling. Copies of each are available from the Centers offering Regional Technical Assistance Services (formerly known as Regional Support and Technical Assistance Centers).

The Behavior Improvement Kit developed by Buckalter, Gerald A., Presbie, Robert J., and Brown, Paul L. Chicago: Science Research Associates, Inc., 1975.

This kit is designed to help teachers solve behavior problems and improve the social and academic skills of pupils. It is based on operant conditioning principles. The program provides a series of procedures designed to resolve behavior problems by strengthening appropriate responses. It provides the teacher with a pinpointing handbook that lists behaviors to increase or decrease. The kit also contains five "counting" picture books with guides, behavior charts and sheets of counting stickers for recording students' behavior. These materials make it possible for the teacher to assess the frequency of the behavior and determine what change technique to use. Nineteen picture books on improving behavior each have a guide and cassette. Two units also have filmstrips.

Chase, Larry. The Other Side of the Report Card: A How-To-Do-It Yourself Program in Affective Education, Goodyear Publishing Company, 1975.

This book consists of how-to-do-it units in affective curriculum. The units are topic oriented and can be adapted by the teacher to be relevant to all grade levels. This book is one of the best in affective education.

Dupont, Henry, ed. Educating Emotionally Disturbed Children: Readings. New York: Harper and Row, 1975.

These psychoeducational and interdisciplinary readings focus on the teacher's role in working with the disturbed child in the school setting. The articles provide a background for a clinical teaching approach in both regular and special classrooms. Among the topics covered are screening, classification, therapy, remedial procedures and strategies, and community resources.

Flynn, Elizabeth, and LaFaso, John F. Designs In Affective Education: A Teacher Resource Program for Junior and Senior High. New York: Paulist Press, 1974.

This resource program contains 126 different teaching strategies on topics such as valuing, responsibility, work, prejudice, family, ecology, and communication to name only a few. Teachers will find this book a very useful and useable guide to activities in the affective domain, particularly at the junior and senior high school level.

Glasser, William. Schools Without Failure. New York: Harper and Row, 1969.

The author of Reality Therapy here applies his theories to contemporary education. While trying not to minimize the adverse effects that poverty and bad social conditions have on children, Glasser maintains that faulty education is the primary cause of school failure. He details the shortcomings of the current educational system and proposes a new program to reduce failure which is based on increased involvement, relevance, and thinking.

Hallahan, Daniel P., and Cruickshank, William M. Psychoeducational Foundations of Learning Disabilities. Englewood Cliffs, N.J.: Prentice-Hall, 1973.

This book provides an overview of current and historical development in the field of learning disabilities. It discusses major issues and offers a critical assessment of the primary teaching methods for learning disability children. It also addresses two aspects of child growth and development which are related to learning disabilities; namely, psychological and educational factors.

Hewett, Frank M. The Emotionally Disturbed Child in the Classroom. Boston: Allyn and Bacon, 1968.

The purpose of this book is to provide guidelines for the development of more efficient public school programs for the emotionally disturbed. The first section reviews three major strategies used in educating the emotionally disturbed and introduces the goals, methodology, and assessment of developmental strategy. Section 2 relates developmental strategy to classroom practices, and section 3 details and evaluates a classroom design implementing developmental strategy.

Hewett, Frank M., and Forness, Steven. Education of Exceptional Learners. Boston: Allyn and Bacon, 1977.

This text provides a thorough introduction to the exceptional learner, not just the emotionally handicapped, but all handicapped learners. It presents background information regarding exceptional learners discussing their similarities and differences across four psychosocial dimensions; flexibility, sociality, intelligence, and individualization. It reviews the problems of assessment and considers the education of exceptional learners, discussing curriculum, conditions and consequences. Finally, it reviews the events leading up to mainstreaming and examines several existing programs designed to facilitate mainstreaming.

Hobbs, Nicholas. The Futures of Children. San Francisco: Jossey-Bass Publishers, 1974.

This is the full report on the federally sponsored Project on Classification of Exceptional Children. Hobbs summarizes classification, describing the prevalence of specific disorders, the adequacy of methods for identifying them, the development of labeling schemes, and directions for future research. He also considers the social consequences of labeling children. The book outlines a plan for serving the needs of children, suggesting that public schools are the natural place for integrating services for children and offering an alternative to institutionalization.

Howe, Leland W., and Howe, Mary Martha. Personalizing Education--Values Clarification and Beyond. New York: Hart Publishing, 1975.

The aim of this book is to make Values Clarification an integral part of the classroom. It explains what Values Clarification is, how it can be used, providing well over 100 strategies and worksheets for personalizing education through Values Clarification.

Long, Nicholas J., Morse, William C., and Newman, Ruth G. Conflict in the Classroom: The Education of Children With Problems. Belmont, California: Wadsworth Publishing, 1976.

This book contains a collection of articles by many leaders in the field of emotional disturbance. The first section, aimed at giving the reader a basic understanding of how it feels to be emotionally disturbed, offers selections from a wide variety of literary artists. Other sections deal with identification and diagnosis, the types of help available outside and inside schools, how to teach the emotionally disturbed, the hygienic management and evaluation, and innovation. Articles range from those providing basic understanding, to those providing practical suggestions for classroom activities.

Mercer, Jane R. Labeling the Mentally Retarded. Berkeley: University of California Press, 1973.

This book is the product of an eight-year study analyzing the labeling process in a large number of community agencies. The author found that schools labeled persons as mentally retarded more than any other agency. They also share these labels more widely within the community. The author discusses some of the problems associated with labeling and makes recommendations for changes in our existing practices.

Pappanikou, A. J., and Paul, James L., eds. Mainstreaming Emotionally Disturbed Children. Syracuse, N.Y.: Syracuse University Press, 1976.

This volume provides a study of the implications of mainstreaming for both children and public school systems. It places mainstreaming in its social, political, philosophical, and historical content. Among the topics considered are the psychology of mainstreaming socio-emotionally disturbed children, social deviance and the implications of behavioral norms in the mainstreamed classroom, curriculum reform, leadership training, and teacher education.

Paul, James L., Neufeld, G. Ronald, and Pelosi, John, eds. Child Advocacy Within the System. Syracuse, N.Y.: Syracuse University Press, 1977.

This book presents a basis for defining and understanding advocacy. It details the principles and theories of child advocacy. Individual contributors explain the basic monitoring and assessing components of advocacy in schools, communities, institutions and governments; training for advocates; and steps in developing advocacy programs.

Paul, James L., Stedman, Donald J., and Neufeld, G. Ronald, eds. Deinstitutionalization: Program and Policy Development. Syracuse, N.Y.: Syracuse University Press, 1977.

The contributors to this book provide a theoretical framework for deinstitutionalization. They examine such areas as labeling and stigma, policy and politics, and the role of consumers. The structure of institutional change includes accountability, program planning, and monitoring of services.

Paul, James L., Turnbull, Ann, And Cruickshank, William M. Mainstreaming: A Practical Guide. Syracuse, N.Y.: Syracuse University Press, 1977.

This is a step-by-step guide providing practical assistance to educators and parents in planning and implementing mainstreaming in local schools. It presents basic information on inservice teacher training and preservice education. It provides guidelines for such areas as ongoing staff development, resource acquisition, and techniques for program evaluation.

Redl, Fritz, and Wineman, David. Children Who Hate: The Disorganization and Breakdown of Behavior Controls. New York: The Free Press, 1951.

This study explores why behavior controls in children break down, how some children defend themselves successfully against adults in their lives, and what can be done to prevent and treat childhood disorganization. By probing in the behavior of a group of extremely aggressive children, the authors attempt to develop methods and attitudes that are applicable to the daily handling of less troubled children by parents and educators.

Saunders, Bruce T., ed. Approaches with Emotionally Disturbed Children. Jericho, N.Y.: Exposition Press, 1974.

This text on emotionally disturbed and behaviorally disordered children offers articles by 22 authorities in the field. Encyclopedic in scope, it covers everything from autism to family crisis. Some of the topics considered include diagnostic processes, methods of treatment, program planning, instructional schemes, and the proper training of educators and therapists.

Simon, Sidney B., Howe, Leland W., and Kirschenbaum, Howard. Values Clarification: A Handbook of Practical Strategies for Teachers and Students. New York: Hart Publishing, 1972.

This book presents numerous practical strategies which engage the student and teacher in evaluating their own values, feelings, and beliefs. Although primarily a collection of strategies (79 in number), it does provide a brief introduction to what the Values Clarification approach is and how to use it.

Turnbull, H. R., and McAllister, Carolyn. The Law and the Mentally Handicapped in North Carolina. Chapel Hill, North Carolina: Institute of Government, 1976.

This book deals with the status of the mentally handicapped under North Carolina law. It draws together all the laws of the state which affect the mentally ill, the mentally retarded, or other mentally disabled persons. It attempts to explain the law in a language that non-lawyers can understand.

Wells, Harold. 100 Ways to Enhance Self-Concept in the Classroom. Prentice-Hall, Inc., 1976.

This excellent reference for teachers of all levels contains 100 exercises specifically designed to help increase student self-concept. It is easy to use and is a very good resource for any teacher of the emotionally handicapped.

Wood, Mary M. Developmental Therapy. Baltimore: University Park Press, 1975.

This is a practical manual and curriculum guide for teachers, students, therapists, and other professionals working directly with emotionally and behaviorally disturbed young children. The first section of the book deals with the treatment model, its underlying assumptions, objectives and validation. The second section describes actual techniques and materials based on the developmental model. The third section presents case studies, and the fourth describes ways in which regular schools and families are involved in the treatment process.

15.2 Classroom Materials

The curriculum materials listed here are only some of the ones that teachers have found to be effective. There are certainly many other materials that are equally effective. Before ordering any materials, LEA's may want to contact the companies listed to send a salesman to demonstrate and suggest what they feel will be most appropriate for your needs. These salesmen are usually carefully trained in their respective materials and demonstrations are usually free.

15.2.1 Reading:

For visual discrimination, left to right direction and skill in following a line of print, the Michigan Tracking Program by Robert Geake can be especially helpful:

Ann Arbor Publishers, Inc.
P.O. Box 388
Worthington, Ohio 43085

For children who have met with repeated failures in learning to read, a linguistic approach is often very successful. The Merrill Linguistic Readers with accompanying Skills Book, by Charles Fries, Rosemary G. Wilson, and Mildred K. Rudolph, is one source which utilizes the linguistic approach.

Charles E. Merrill Books, Inc.
1300 Alum Creek Drive
Columbus, Ohio 43216

The SRA Reading Program utilizes linguistic, phonetic, and sight-word methods for inductive teaching of reading and comprehension skills.

Science Research Associates, Inc.
259 East Erie Street
Chicago, Illinois 60611

The Sullivan Programmed Reading Series is another very successful reading series that utilizes the linguistic approach. These readers have very funny cartoon-like pictures that accompany the stories which are very helpful in holding the interest of the "tuned-off" reader.

Sullivan Associates
Programmed Reading Series
Webster Division-McGraw Hill Book Company
New York, New York

The SRA Reading Laboratory Ib and Ic is an excellent supplementary reading material since it provides for the many ability levels normally found in classrooms. It allows each student to begin at his own level, where he is assured success, and to progress as fast as his learning rate permits.

Science Research Associates
259 East Erie Street
Chicago, Illinois 60611

For specific and concentrated experiences in reading for different purposes, consult The Specific Skills Series by Richard A. Boning. This program is designed to develop eight crucial reading skills, provoking practice materials for pupils on a number of different reading levels. The passages are brief enough to hold pupils with the most restricted attention span, yet diverse enough to appeal to students of varying ages, interests and abilities.

Barnell Loff, Ltd.
958 Church Street
Baldwin, New York 11510

The Learning to Think Series helps young children prepare for reading and mathematics. It includes exercises dealing with verbal meaning, word fluency, visual perception, space thinking, reasoning, memory, and fine motor skills. It can also be used with older students to reinforce independent work habits. This is an especially enjoyable book for most students.

See SRA address given above.

The Hoffman audiovisual instructional system in reading consists of a projector (with a viewing screen and record player) and study units (with filmstrips and records). This program is especially good for motivation, auditory discrimination needs, auditory memory problems, phonetic analysis needs, hyperactive learners, reluctant learners, individualized and/or small group participation, and reading for understanding.

Hoffman Information Systems
56 Peck Road
Arcadia, California 91006

Children (especially boys) who need high-interest, low level work commonly enjoy the The Checkered Flag Series by Henry A. Bamman and Robert J. Whitehead. Within this series the authors have attempted to communicate clearly and honestly the various aspects of sports cars and their drivers. This is published by Field Educational Publications, Incorporated.

Another high-interest reading program that is very useful is the We Are Black reading program by SRA which includes biographies of famous black people, anecdotes, and essays.

Science Research Associates, Inc.
259 East Erie Street
Chicago, Illinois 60611

The Bobbs-Merrill Developmental Reading Text Workbook Series is another series used by many. This series of workbooks correlates carefully graded story content with systematically prepared exercises to provide practice in basic reading skills. This series is usually used with students who are reading close to grade level as the reading selections are closely correlated with children's interests at that particular level.

The Bobbs-Merrill Company, Inc.
A Subsidiary of Howard W. Sams and Company, Inc.
Indianapolis, New York

The New Reading Skilltexts are very similar to the Bobbs-Merrill series described above.

Charles E. Merrill Books, Inc.
1300 Alum Creek Drive
Columbus, Ohio 43216

Another series published by Charles E. Merrill Books, Inc. is the New Phonics Skilltexts by Rachael Brake which involves a balanced, practical application of all phonic and structural principles.

See Charles E. Merrill Books, Inc. address above.

For students reading from fourth to sixth grade levels, the Imperial Intermediate Reading Program consists of stimulating taped instruction aimed at developing important reading skills.

Imperial International Learning
247 West Court Street
Kankakee, Illinois 60901

For fluency training, teachers have found success with I/CT's Guided Reader with accompanying Guided Reading Story Library. During "Guided Reading," print is unveiled in a left-to-right manner and as the student follows along, he develops eye-movement habits and perceptual behaviors that are most appropriate for reading. The reading selections in this program have recently been updated and therefore have contemporary plots. Developing good comprehension is also an important part of this program. This program is published by Instructional/ Communications Technology, Inc./Taylor Associates.

The Peabody Rebus Reading Program by Richard A. Woodcock, Ed.D. and Charlotte R. Clark, M.A. can be very successful with beginning readers. The program needs to be used over a long-term period to help the student transfer successfully from the symbols (rebuses) to traditional reading.

American Guidance Service, Inc.
Publishers' Building
Circle Pines, Minnesota 55014

I Can Eat an Elephant books

Reading Research
Post Office Box 193
Provo, Utah 84601

This is a boxed collection of ten very small, very colorful books made of extremely durable material. Their purpose is to introduce beginning readers to multi-syllable words by showing how a big word can be "eaten" if you take only small bites, i.e., syllables.

Jimmy and Joe Reading Series

Garrard
Champaign, Illinois 61820

This is a series of hardbound, colorful books written on a first grade reading level. They are designed to appeal primarily to readers in K-3 grades. Jimmy and Joe are two youngsters, one Black and one White, who have various adventures.

The Monster Reading Series

Bowmar
4563 Colorado Boulevard
Los Angeles, California 90039

This series of paperback, colorful books have Monster as their main character. The series is designed for beginning readers and serves as excellent incentive for creative stories written by the child.

Sprint Reading Series (Library 1) Scholastic

Scholastic
904 Sylvan Avenue
Englewood Cliffs, New Jersey 07632

Each Sprint library has several books and multiple copies of each. Library 1 is written for low second grade reading level. Material is high-interest, low vocabulary, and illustrated with photographs. A Teacher's Guide with Spirit Masters accompanies the library. A few discussion questions, vocabulary development, and word recognition practice are provided.

The Scrambler Series

Xerox Education Publications
1250 Fairwood Avenue
Post Office Box 2639
Columbus, Ohio 43216

"Exciting tales in comic book format convert reluctant readers." These well-illustrated comics have vocabulary controlled by Ipache and Dolch word lists. The short stories have follow-up exercises and activities. Two grade 5 books are available with reading level 2.5 - 3.5. Grade 6 books are reading level 3.5 - 4.0.

15.2.2 Phonics: For practice in phonics, try both Phonics is Fun, Books 1, 2, and 3 and Phonics Workbook, Books A, B, and C. In both of these workbooks, the number of phonetic elements, definitions, rules, and variations in vowel and consonant sounds are held to a minimum since the aim in teaching phonics is to help the child attack new words with ease rather than to make him an authority in this area of linguistics. Both of these workbooks are published by Modern Curriculum Press, Inc.

For more advanced students, the Phonics We Use series includes workbooks from Level 1 to Level 5.

Lyons and Carnahan, Inc.
407 East 25th Street
Chicago, Illinois 60616

For children who have specific reading and spelling disabilities and need intensive remedial work, A Guide To Teaching Phonics by June Lyday Orton can be helpful. This book is especially good for a teacher new in the profession for it describes and explains the "Orton Approach" very thoroughly. The focus is upon the needs of beginning pupils, but with some suggestions for presenting the material to older pupils. This is a direct approach to the study of phonics, presenting the sounds of the phonograms orally as separate units and teaching the process of blending them into syllables and words for recognition in reading.

Educators Publishing Service, Inc.
75 Moulton Street
Cambridge, Massachusetts 02135

Another method found successful in teaching beginning phonics is the Phonovisual Method. This method can be a really fun way to learn phonics and motivates many students with short attention spans, especially younger ones.

Phonovisual Products, Inc.
12216 Parklawn Drive
Rockville, Maryland 20852

15.2.3 Spelling: Skills in Spelling by Neville H. Bremer is a basic series of spelling text. This is published by:

McCormick-Mathers Publishing Company, Inc.
Wichita, Kansas 67201

For students with visual learning problems who need intensive remedial work, the KASS method has been used successfully.

The Macmillan English Series is a good basic language series:

Macmillan Publishing Company, Inc.
866 Third Avenue
New York, New York 10022

For instruction in a variety of skills, the Looking At Words series by Catherine White is suggested. It is published by Educational Developmental Laboratories, Inc., a division of McGraw-Hill. This series involves the use of the EDL-Tach-X.

15.2.4 Math: For students who have a difficult time understanding numbers and operations on numbers, try the Structural Arithmetic Program, kit and workbooks, by Stern, Stern, and Gould, published by Houghton Mifflin Company in Boston. This program can be very successful with students who had never before had any concept of what numbers are all about.

The first two levels of Elementary School Mathematics, published by Addison-Wesley, are also very good to use with low-level math students. The pages are very colorful and spacious.

The following is a list of other math series recommended either as basic texts or for supplementary exercises:

New Ways in Numbers - (Modern)
D. C. Heath and Company
Lexington, Massachusetts

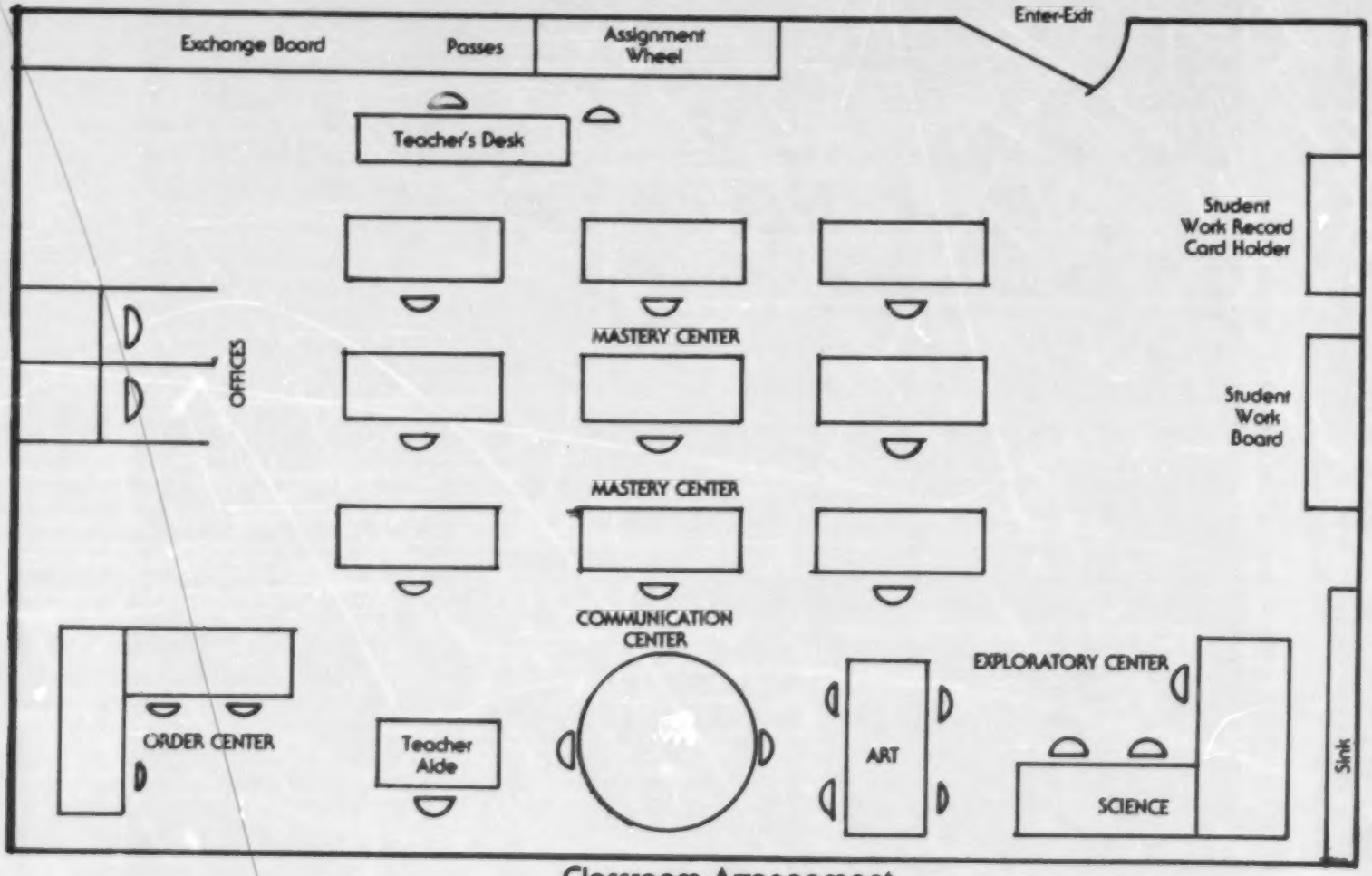
Mathematics 1, 2, 3, 4, 5, 6, 7, or 8
(by) McSwain
Laidlaw

Greater Cleveland Mathematics Program
Science Research Associates, Inc.

Programmed Math, A Sullivan Associates Program from McGraw-Hill Book Company. This series is a good teaching tool.

For students with visual motor and perception problems, The Frostig Program for the Development of Visual Perception by Marianne Frostig and David Horne, Follett Educational Corporation, Chicago, Illinois, can be especially helpful.

Fig 2



Classroom Arrangement

HEWETT MODEL

Regular Classroom with Supplementary Instructional Services

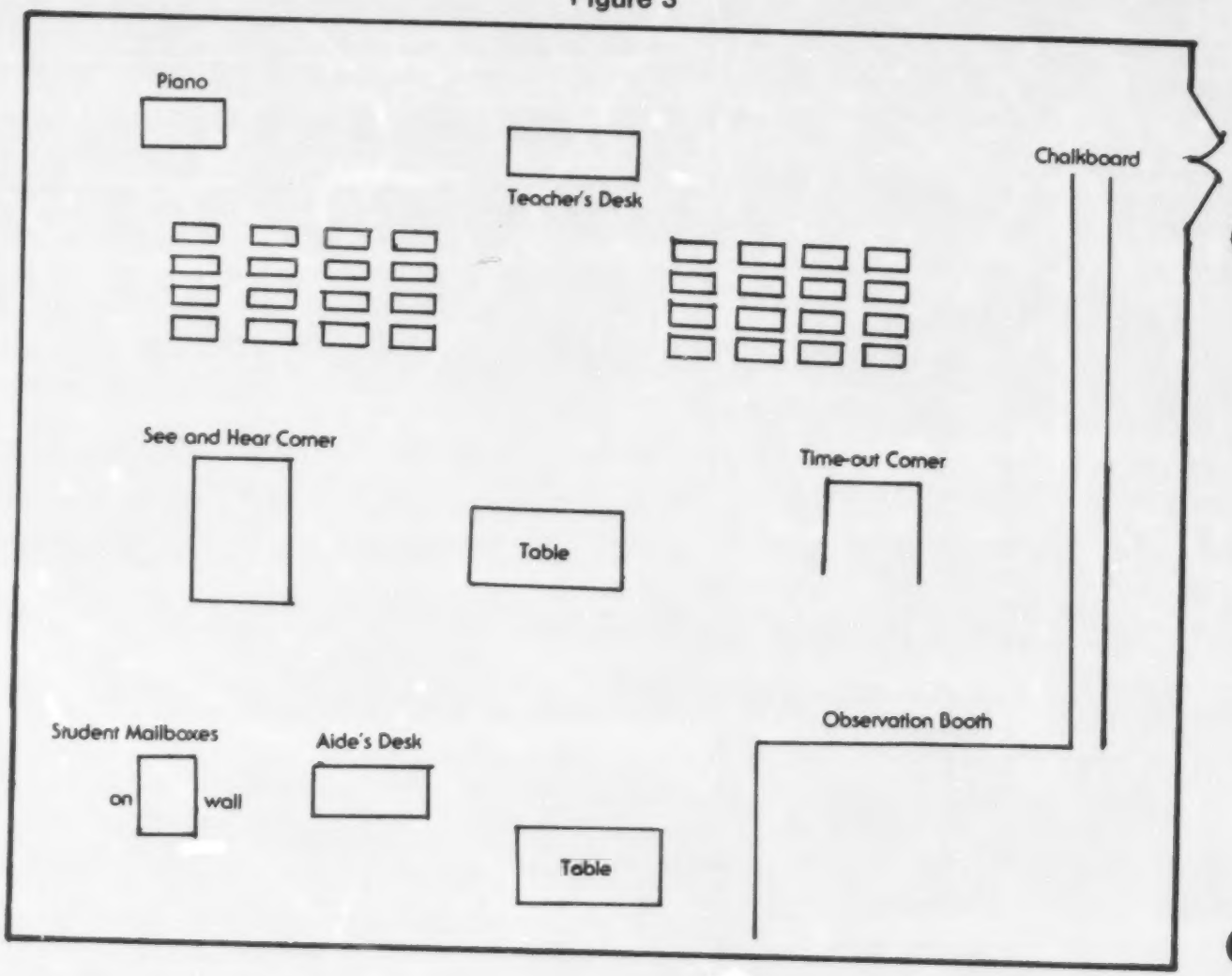
1) Large instruction area - Student desks are located at the front of the room, half on one side and half on the other facing the middle of the room. This division is the basis of two teams (east and west) which compete with each other during the school week on various nonacademic tasks.

2) Small instruction area - Several tables are located in the back of the room and are used for small group instruction, contract evaluation and special projects.

3) See and Hear corner - The See and Hear corner is used primarily for listening to tapes or records and receiving individual instruction from the teacher or aide.

4) Time-out corner - A student having a problem may remove himself from the rest of the class and go to the time-out corner to get settled. The teacher or aide might separate a student for the same purpose. The time-out corner is located near the back of the room. There the student sits at a desk within partitions on three sides which minimize distractions.

Figure 3



INDIVIDUAL EDUCATION PROGRAM

STUDENT		COMMITTEE	
1. Name	Jimmy Brown	Name	Position
Address	1312 Hunter Street, Chapel Hill, NC 27514	Sara Johnson	Principal
Grade	6	Patricia Brown	Parent
Current placement	Mrs. Jones' 6th grade	John Lentz	School Psychologist
Date of birth	3-21-66	Jerry Smith	E. H. Teacher
		Linda Jones	Sixth Grade Teacher
		Brenda Taylor	Mental Health Consultant
		Bill Patterson	Resource Teacher
		Annie Jones	Gifted and Talented Teacher
		IEP from 10-1-77 to 10-1-78	

3. Present level of Educational Functioning	4. Annual Goal Statements	5. Instructional Objectives	6. Objective Criteria and Evaluation
Strengths - Possesses superior intelligence and is achieving above grade level in all academic areas. Needs 1. To improve peer relations	1. Jimmy will gain a greater sense of identity with and belonging to the group by more active participation in peer group activities.	1a. Encourage greater input into and attentiveness to group discussions. b. Help Jimmy find ways to use his intellect and unique talents to contribute meaningfully to cooperative small group projects. c. Improve skill development in games and sports and utilize the social interaction opportunities inherent in these activities. d. Explore with Jimmy his feelings about relations with peers, feelings of being different, etc. e. Point out loner behaviors as they occur.	1a. Sociogram b. Observation by P.E. teacher, G.T. teacher, and resource teacher. c. Feedback from students through class meetings. d. Feedback from Jimmy.

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		Annie Jones	Gifted and Talented Teacher
		IEP from 10-1-77 to 10-1-78	

3. Present level of Educational Functioning	4. Annual Goal Statements	5. Instructional Objectives	6. Objective Criteria and Evaluation
Needs, continued 2. To better control his anger	2. Jimmy will learn alternative means of expressing anger.	2a. Discuss the fact that he has trouble controlling his anger (at school and at home). b. Discuss role play ways of achieving better control. c. Praise him when he is able to maintain control in a difficult situation. d. Hold when he cannot maintain control. e. Assist him in discussing his feelings when in control. f. Praise him when he is able to work through a problem to the point of resolution.	2. Walker Problem Behavior Identification Checklist will show a decrease in temper tantrums at home and school.

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		Bill Patterson	Resource Teacher
		Annie Jones	Gifted and Talented Teacher
		IEP from 10-1-77 to 10-1-78	

3. Present Level of Educational Functioning	4. Annual Goal Statements	5. Instructional Objectives	6. Objective Criteria and Evaluation
Needs, continued			
3. To improve body image	3. Jimmy will be more accepting of himself and have a more realistic view of both his strengths and weaknesses.	3a. Direct Jimmy in a success-oriented motor skills program to help him develop physically. b. Observe his daily activity and praise him when he performs well. c. Create an atmosphere of acceptance, and let him know he is a valued member of a group.	3. Sentence completion test - Mooney Problem Checklist.

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		Bill Patterson	Resource Teacher
		Annie Jones	Gifted and Talented Teacher
		IEP from 10-1-77 to 10-1-78	

3. Present Level of Educational Functioning	4. Annual Goal Statements	5. Instructional Objectives	6. Objective Criteria and Evaluation
4. To feel more accepted and secure with his family	4. Jimmy will reduce hostile, competitive interactions with his brother and sister.	4a. Discuss times when Jimmy feels discriminated against in family. b. Explore reluctant feelings towards siblings and mother. c. Separate out for Jimmy what appears to be just and unjust, reasonable treatment. Lead him to perceive these distinctions himself. d. Explore verbally the complexity of Jimmy's power to lessen hostility and increase acceptance between self and siblings.	4. Reports of family therapists. Reports from parents.

INDIVIDUAL EDUCATION PROGRAM

STUDENT		COMMITTEE	
1. Name	Jimmy Brown	Name	Position
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		Annie Jones	Gifted and Talented Teacher
		IEP from 10-1-77 to 10-1-78	

3. Present level of Educational Functioning	4. Annual Goal Statements	5. Instructional Objectives	6. Objective Criteria and Evaluation
5. To be challenged in his school work	5. Jimmy will become more stimulated in academic work.	5a. Cooperatively plan with Jimmy the substance of his academic program making use of both texts and enrichment resources. b. Make use of expressive media (drawing, creative writing, etc.) and group project experiences to help Jimmy resolve personal difficulties and to work on problems he has interacting with others.	5. Will be decrease in amount of "escape" reading done by Jimmy at home and at school.

7. Educational Services to be Provided:

A. Services Required	B. Date Initiated	C. Duration of Service	D. Individual Responsible for the Service
Resource room	9-1-77	6-10-78	E.H. Resource Teacher
Ind. and group counseling	9-15-77	6-10-78	Guidance Counselor
Motor skills program	9-15-77	1-10-78	P.E. Teacher
Family therapy	10-1-77	6-10-78	Mental Health Therapist
Gifted and talented program	9-1-77	6-10-78	Gifted and Talented Teacher

Extent of time in the regular education program:

Will be in the gifted and talented program for three periods per day.(academic subjects).
Will be in the resource classroom for two periods per day.
Will be in the regular program for two periods per day (music and physical education).

Justification of the Individual Education Program:

It is the consensus of the local placement committee that Jimmy's needs can best be met by the above outlined program.

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8. I have had the opportunity to participate in the development of the Individual Education Program.

I agree with the Individual Education Program ☐

I disagree with the Individual Education Program ☐

/s/ Mrs. Patricia Brown
Parent's Signature

North Carolina Residential and Hospital Programs for Emotionally Handicapped Pupils

. Psychiatric Hospitals

.. John Umstead Adolescent Unit, Butner. Serves all of North Carolina. The educational components of John Umstead are called Bowling Green School of Granville County; ages 13 to 19; capacity 24; average length of stay is 6 to 18 months.

.. John Umstead Children's Psychiatric Unit, Butner. Serves all of North Carolina; ages 4-12, inpatient capacity 26; average stay is 6 months to several years.

.. Broughton Hospital Youth Unit, Morganton. Serves 35 counties in Western North Carolina; ages 12 to 17; capacity 32; average stay is 6 months.

.. Dorothea Dix Child Psychiatry Outpatient Clinic, Raleigh. Serves 20 counties of Southeastern Region; ages 3 to 18; capacity 125 for diagnosis and treatment.

.. Cherry Hospital, Children's Unit, Goldsboro. Serves Eastern North Carolina; ages 6 to 18; capacity 31; length of stay is 6 months to 3 years.

.. Homewood School on the grounds of Highland Hospital, Asheville. Provides an accredited secondary education program for the students in Highland Hospital and for fifteen severely handicapped children from Asheville City and Buncombe County.

.. North Carolina Memorial Hospital, Chapel Hill. Serves all of North Carolina and also out-of-state referrals. Boys and girls ages 3 to 12; capacity 9; average stay is 2 to 6 months.

. Re-Ed School

.. Wright School, Durham. Serves mainly North Carolina's North Central Mental Health Region, ages 6-12; capacity for 24 residential plus 3 day students; length of stay is 1 to 6 months.

. Therapeutic Camps

.. The 1977 legislature appropriated 3.1 million dollars to the Department of Human Resources to develop a network of Therapeutic Wilderness Camps, one in each of the four Department of Human Resources Regions. Each camp will be designed for 50 boys. Final plans are now in process.

.. Frontiersman Program at the Kennedy Home, Kinston. Serves boys and girls ages 13 to 15; capacity is 16; average length of stay is 6 months to 1 year.

. Residential Home

.. Alexander Children's Center, Charlotte. Serves all of North Carolina, also children of other states; ages 6-12; capacity 30 residential, 10 day; average stay 18 months.

. Group Homes Which Provide On-Campus Programs

.. Thompson Children's Home, Charlotte. Has a special cottage for emotionally disturbed children ages 6 to 12. Educational component is provided on campus.

.. Kid's Place, Rutherfordton. Boys and girls ages 5 to 12; capacity of nine residential and 10 to 15 day; average stay is 9 to 12 months.

.. Earth Home, Greenville. Ages 5 to 15 day; capacity of 5; average stay 6 months to a year.

Note: In addition to the preceding, some educational programs are being provided by Community Mental Health Clincis. Children served by these programs vary from severely emotionally handicapped to severely mentally retarded; from pre-school age to adults. Length of stay varies from one month to several years. Exact data is not available at this time.

. Resources for Autistic Children

.. Five TEACCH Centers provide diagnostic evaluation, individualized treatment and parent group activities. Centers serve 105 children yearly: Asheville, Charlotte, Chapel Hill, Greenville, and Wilmington.

.. Nineteen classes for autistic and other communications handicapped children are made possible through combined efforts and resources of TEACCH, local school units, State Department of Public Instruction, federal monies and the North Carolina Society for Autistic Children. Classes serve an average each of 6.7 daily. All classes except the Chapel Hill class are housed in public schools.

Asheville - 2	Gastonia - 1	High Point - 1
Chapel Hill - 1	Goldsboro - 1	Raleigh - 1
Charlotte - 1	Greensboro - 2	Washington City - 1
Elizabeth City - 1	Greenville - 1	Whiteville - 1
Fayetteville - 1	Hickory - 1	Wilmington - 3

In addition to the above, the North Carolina Society for Autistic Children sponsors an eight-week summer camping program and has recently established a group home called Triad Home located in Greensboro to serve a capacity of 5 to 6 autistic adolescents. Triad Home offers a 24-hour program which includes a day classroom program.